

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF  
COMMITTEE (in full)**USE FEC MAILING LABEL  
OR TYPE OR PRINT**Example: If typing, type  
over the lines

Illinois Republican Party

ADDRESS (number and street)

P.O. Box 64897

☐Check if different  
than previously  
reported. (ACC)

Chicago

IL

60664

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00005926

3. IS THIS  
REPORT☒NEW  
(N)

OR

☐AMENDED  
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15  
Quarterly Report(Q1)☐July 15  
Quarterly Report(Q2)☐October 15  
Quarterly Report(Q3)☐January 31  
Quarterly Report(YE)☐July 31 Mid-Year  
Report(Non-election  
Year Only) (MY)☐Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)  
(Non-Election  
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)  
(Non-Election  
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☒

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day  
**PRE**-Election  
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the  
State of(d) 30-Day  
**Post**-Election  
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the  
State of

5. Covering Period

09

01

2008

through

09

30

2008

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Dave Syverson, Treasurer

Signature of Treasurer

Electronically Filed by Dave Syverson, Treasurer

Date

10

20

2008

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office  
Use  
Only**FEC FORM 3X**  
(Rev. 12/2004)

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name  
Illinois Republican Party

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	9	0	1	2	0	0	8

To:

M	M	D	D	Y	Y	Y	Y
0	9	3	0	2	0	0	8

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 <span>2008</span>		135585.12
(b) Cash on Hand at Beginning of Reporting Period .....	301626.86	
(c) Total Receipts (from Line 19) .....	334318.00	1937236.80
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	635944.86	2072821.92
7. Total Disbursements (from Line 31) .....	274872.56	1711749.62
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	361072.30	361072.30
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

☐ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

## For further information contact:

Federal Election Commission  
999 E street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE OF RECEIPTS**

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name  
Illinois Republican Party

Report Covering the Period:

From:

M M D D Y Y W Y  
0 9 0 1 2 0 0 8

To:

M M D D Y Y W Y  
0 9 3 0 2 0 0 8

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	137805.00	727485.00
(i) Itemized (use Schedule A) .....	77066.68	413986.30
(ii) Unitemized .....	214871.68	1141471.30
(iii) TOTAL (add Lines 11(a)(i) and (ii) ..... ➤	0.00	0.00
(b) Political Party Committees .....	0.00	219450.00
(c) Other Political Committees (such as PACs) .....	214871.68	1360921.30
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) ..... ➤		
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	20.00	2166.12
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	16.14	136.69
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	119410.18	574012.69
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	119410.18	574012.69
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	334318.00	1937236.80
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	214907.82	1363224.11

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	18814.30	333027.90
(ii) Non-Federal Share.....	33447.67	564317.82
(b) Other Federal Operating Expenditures.....	25615.28	146233.59
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➡	77877.25	1043579.31
22. Transfers to Affiliated/Other Party Committees.....	0.00	350.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	5027.19
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	10080.00	33155.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	5000.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	10080.00	38155.00
29. Other Disbursements.....	0.00	24.25
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share .....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	186915.31	624613.87
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	186915.31	624613.87
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	274872.56	1711749.62
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	241424.89	1147431.80

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	214871.68	1360921.30
34. Total Contribution Refunds (from Line 28(d)) .....	10080.00	38155.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	204791.68	1322766.30
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	44429.58	479261.49
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	20.00	2166.12
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	44409.58	477095.37

**SCHEDULE L (FEC Form 3X)**

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**AGGREGATION PAGE: LEVIN FUNDS**

Transaction ID: SL1

NAME OF COMMITTEE (In Full)  
Illinois Republican Party

NAME OF ACCOUNT  
LEVIN

	COLUMN A TOTAL THIS PERIOD	COLUMN B YEAR-TO-DATE
1. RECEIPTS FROM PERSONS		
a. Itemized..... (Use Schedule L-A)	20600.00	162100.00
b. Unitemized.....	0.00	0.00
c. Total.....	20600.00	162100.00
2. OTHER RECEIPTS.....	0.00	0.00
3. TOTAL RECEIPTS..... (Add Lines 1c and 2)	20600.00	162100.00
4. TRANSFERS TO FEDERAL OR ALLOCATION ACCOUNT (Use Schedule L-B)		
a. Voter Registration.....	0.00	0.00
b. Voter ID.....	0.00	0.00
c. GOTV.....	0.00	0.00
d. Generic Campaign.....	0.00	0.00
e. Total.....	0.00	0.00
5. OTHER DISBURSEMENTS.....	105000.00	110000.00
6. TOTAL DISBURSEMENTS..... (Add Lines 4e and 5)	105000.00	110000.00
7. BEGINNING CASH ON HAND..... (for Column B, use cash as of January 1st)	141500.00	5000.00
8. RECEIPTS..... (from Line 3)	20600.00	162100.00
9. SUBTOTAL..... (Add Lines 7 and 8)	162100.00	167100.00
10. DISBURSEMENTS..... (From Line 6)	105000.00	110000.00
11. ENDING CASH ON HAND..... (Subtract Line 10 From Line 9)	57100.00	57100.00

**SCHEDULE L-A (FEC Form 3X)**  
**ITEMIZED RECEIPTS OF LEVIN FUNDS**Use separate schedule(s)  
for each category of the  
Aggregation Page

PAGE 7 / 128

FOR LINE NUMBER:  
(check only one) ☒ 1a ☐ 2Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions  
or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Illinois Republican Party

Full Name (Last, First, Middle Initial)

A. Edgar Jannotta

Mailing Address 222 W. Adams St.

City

Chicago

State

IL

Zip Code

60606-

Name of Employer or Principal Place of Business

William Blair &amp; Co.

Occupation

Chairman

Transaction ID: SL80916.C291587

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 1 1 / 2 0 0 8

Amount of Each Receipt this Period

5000.00

Aggregate Year-to-Date

10000.00

Account: LEVIN

Full Name (Last, First, Middle Initial)

B. Mary McKenna

Mailing Address 1860 N Fremont St

City

Chicago

State

IL

Zip Code

60614-5005

Name of Employer or Principal Place of Business

Our Lady of Perpetual Hope

Occupation

Teacher

Transaction ID: SL80916.C291041

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 0 8 / 2 0 0 8

Amount of Each Receipt this Period

600.00

Aggregate Year-to-Date

600.00

Account: LEVIN

Full Name (Last, First, Middle Initial)

C. Jack Miller

Mailing Address 485 Half Day Rd Ste 200

City

Lincolnshire

State

IL

Zip Code

60069-2933

Name of Employer or Principal Place of Business

Quill Corporation

Occupation

Executive

Transaction ID: SL80916.C291586

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 1 1 / 2 0 0 8

Amount of Each Receipt this Period

10000.00

Aggregate Year-to-Date

10000.00

Account: LEVIN

Full Name (Last, First, Middle Initial)

D. Christopher Reyes

Mailing Address 735 E Westminster Rd

City

Lake Forest

State

IL

Zip Code

60045-2232

Name of Employer or Principal Place of Business

Reyes Holdings, LLC

Occupation

Chairman

Transaction ID: SL80916.C291503

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 1 0 / 2 0 0 8

Amount of Each Receipt this Period

5000.00

Aggregate Year-to-Date

5000.00

Account: LEVIN

SUBTOTAL of Receipts This Page (optional) .....

20600.00

TOTAL This Period (last page this line number only) .....

20600.00

**SCHEDULE L-B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS  
OF LEVIN FUNDS**Use separate schedule(s)  
for each category of the  
Aggregation PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/>	4a	<input type="checkbox"/>	4c	<input checked="" type="checkbox"/>	5
<input type="checkbox"/>	4b	<input type="checkbox"/>	4d		

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NAME OF COMMITTEE (In Full)

Illinois Republican Party

A.

Full Name (Last, First, Middle Initial) / Full Organization Name

Illinois Republican Party

Mailing Address Northern Trust Non-Federal Account  
205 W. Randolph Suite 1245City State Zip Code  
Chicago IL 60606Purpose of Disbursement  
Transfer of Funds

Transaction ID: 4B81014.E20276

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	9		2	0	0	8

Amount of Each Disbursement this Period

105000.00

Account: LEVIN

SUBTOTAL of Disbursements This Page (optional) .....

105000.00

TOTAL This Period (last page this line number only) .....

105000.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 128

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Illinois Republican Party

**A.**

Full Name (Last, First, Middle Initial)

Linda Aherns

Mailing Address 1255 N Clark St

City

Chicago

State

IL

Zip Code

60610-2258

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 0 8 / 2 0 0 8

Transaction ID: 80916.C291055

Amount of Each Receipt this Period

500.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Kenneth Alderson

Mailing Address 1211 Chruchill Road

City

Springfield

State

IL

Zip Code

62702-2272

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
IL Municipal League

Occupation

Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 1 0 / 2 0 0 8

Transaction ID: 80916.C291494

Amount of Each Receipt this Period

50.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Penny Arnold

Mailing Address 6086 Bobwhite Rd.

City

Louisville

State

IL

Zip Code

62858

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Cisne High School

Occupation

Principal

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 0 5 / 2 0 0 8

Transaction ID: 80916.C290959

Amount of Each Receipt this Period

110.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

660.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 128

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Illinois Republican Party

**A.**

Full Name (Last, First, Middle Initial)

Daniel Asher

Mailing Address 211 E. Chicago Ave., #1020

City

Chicago

State

IL

Zip Code

60611

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Equitec

Occupation  
Broker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 1 1 / 2 0 0 8

Transaction ID: 80916.C291556

Amount of Each Receipt this Period

5000.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Robert Asher

Mailing Address 180 E. Pearson St., #4005

City

Chicago

State

IL

Zip Code

60611

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 1 1 / 2 0 0 8

Transaction ID: 80916.C291560

Amount of Each Receipt this Period

5000.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Janet Ayers

Mailing Address 1410 Chicago Ave.

City

Evanston

State

IL

Zip Code

60201-5323

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1450.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 0 9 / 2 0 0 8

Transaction ID: 80916.C291171

Amount of Each Receipt this Period

250.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

10250.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER: PAGE 11 / 128

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Illinois Republican Party

**A.**

Full Name (Last, First, Middle Initial)

Bruce Barker

Mailing Address 2042 S. Douglas Ave.

City

Springfield

State

IL

Zip Code

62704-3526

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 1 0 / 2 0 0 8

Transaction ID: 80916.C291434

Amount of Each Receipt this Period

250.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Jon Barker

Mailing Address R. R 1 Box 127

City

Broughton

State

IL

Zip Code

62817-9770

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self-Employed

Occupation  
Health Care

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 0 9 / 2 0 0 8

Transaction ID: 80916.C291265

Amount of Each Receipt this Period

80.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Charles Bartels

Mailing Address 26921 Countryside Lake Drive

City

Mundelein

State

IL

Zip Code

60060-3347

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Manpower

Occupation  
Business Owner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 0 2 / 2 0 0 8

Transaction ID: 80916.C290662

Amount of Each Receipt this Period

330.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

660.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 128

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Illinois Republican Party

**A.**

Full Name (Last, First, Middle Initial)

John Benish

Mailing Address 843 S. Washington St.

City

Hinsdale

State

IL

Zip Code

60521-4530

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Cook-Illinois Corporation

Occupation

President & CEO

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 1 2 / 2 0 0 8

Transaction ID: 80916.C291734

Amount of Each Receipt this Period

200.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

John Benn

Mailing Address 1556 Seven Pines Rd.  
Apt. J

City

Springfield

State

IL

Zip Code

62704-6662

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
IL Dept. of Revenue

Occupation

Revenue Officer

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 1 9 / 2 0 0 8

Transaction ID: 80920.C292474

Amount of Each Receipt this Period

75.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

George Berry

Mailing Address 4N160 Burr Rd.

City

St. Charles

State

IL

Zip Code

60175

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation

Retired

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

605.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 1 1 / 2 0 0 8

Transaction ID: 80916.C291608

Amount of Each Receipt this Period

300.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

575.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 128

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Illinois Republican Party

**A.**

Full Name (Last, First, Middle Initial)

George Berry

Mailing Address 4N160 Burr Rd.

City

St. Charles

State

IL

Zip Code

60175

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

905.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 3 0 / 2 0 0 8

Transaction ID: 81010.C292996

Amount of Each Receipt this Period

300.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Alfred Biller

Mailing Address 263 Strathmore Ln

City

Bloomington

State

IL

Zip Code

60108-1931

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 0 9 / 2 0 0 8

Transaction ID: 80916.C291246

Amount of Each Receipt this Period

50.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Wilma Birkeland

Mailing Address 101 W Windsor Rd Apt 6104

City

Urbana

State

IL

Zip Code

61802-6663

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

435.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 3 0 / 2 0 0 8

Transaction ID: 81010.C293077

Amount of Each Receipt this Period

110.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

460.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 / 128

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Illinois Republican Party

**A.**

Full Name (Last, First, Middle Initial)

John Blackburn

Mailing Address 20 Pinehurst Road

City

Lincoln

State

IL

Zip Code

62656-9100

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Country Insurance

Occupation  
Insurance

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 1 0 / 2 0 0 8

Transaction ID: 80916.C291320

Amount of Each Receipt this Period

100.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Sidney Bonser

Mailing Address 1400 W Everett Rd

City

Lake Forest

State

IL

Zip Code

60045-2612

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 1 2 / 2 0 0 8

Transaction ID: 80916.C291711

Amount of Each Receipt this Period

100.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Victor Both

Mailing Address 10563 S Longwood Dr

City

Chicago

State

IL

Zip Code

60643-2615

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 0 8 / 2 0 0 8

Transaction ID: 80916.C291059

Amount of Each Receipt this Period

200.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

400.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 / 128

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Illinois Republican Party

**A.**

Full Name (Last, First, Middle Initial)

John Branz

Mailing Address 198 E Jeanette St

City

Herscher

State

IL

Zip Code

60941-5009

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Kankakee Bank

Occupation

Branch Manager

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 0 9 / 2 0 0 8

Transaction ID: 80916.C291122

Amount of Each Receipt this Period

100.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

James Brigham

Mailing Address 2800 W Westridge Pl

City

Carbondale

State

IL

Zip Code

62901-1044

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation

Retired

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 1 7 / 2 0 0 8

Transaction ID: 80917.C292230

Amount of Each Receipt this Period

100.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Donald Burney

Mailing Address 535 W. Ogden Ave. #228

City

Naperville

State

IL

Zip Code

60563-3286

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation

Retired

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 1 0 / 2 0 0 8

Transaction ID: 80916.C291418

Amount of Each Receipt this Period

100.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

300.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 16 / 128

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Illinois Republican Party

**A.**

Full Name (Last, First, Middle Initial)

Reno Caneva

Mailing Address 225 E 10th St

City

Lockport

State

IL

Zip Code

60441-3411

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self-Employed

Occupation  
Doctor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 1 6 / 2 0 0 8

Transaction ID: 80916.C292053

Amount of Each Receipt this Period

100.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Marina Carney

Mailing Address 162 W Westminster Road

City

Lake Forest

State

IL

Zip Code

60045-2125

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation  
Housewife

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 0 9 / 2 0 0 8

Transaction ID: 80916.C291240

Amount of Each Receipt this Period

500.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Eugene Carpino

Mailing Address 141 Rose Dr

City

Bloomington

State

IL

Zip Code

60108-1021

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
House Republican Organiza-  
tion

Occupation  
Director of Operations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 0 4 / 2 0 0 8

Transaction ID: 80916.C290468

Amount of Each Receipt this Period

1200.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

1800.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 17 / 128

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Illinois Republican Party

**A.**

Full Name (Last, First, Middle Initial)

Milton Carus

Mailing Address 2222 Chartres St.

City

Peru

State

IL

Zip Code

61354

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Carus Corp.

Occupation  
Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 1 9 / 2 0 0 8

Transaction ID: 80920.C292487

Amount of Each Receipt this Period

200.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Ciro Cirrincione

Mailing Address 19 S Meadow Ct

City

South Barrington

State

IL

Zip Code

60010-9554

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Barrington Orthopedic Sp.

Occupation  
Physician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 0 9 / 2 0 0 8

Transaction ID: 80916.C291165

Amount of Each Receipt this Period

100.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Mary Conover

Mailing Address 16 Jackson Pl.

City

Oswego

State

IL

Zip Code

60543-0191

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 1 6 / 2 0 0 8

Transaction ID: 80916.C292100

Amount of Each Receipt this Period

100.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

400.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 18 / 128

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Illinois Republican Party

**A.**

Full Name (Last, First, Middle Initial)

John Conrad

Mailing Address 703 Orchard Dr.

City

Macomb

State

IL

Zip Code

61455-1122

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Western Illinois Universi-  
ty

Occupation  
Professor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 0 9 / 2 0 0 8

Transaction ID: 80916.C291237

Amount of Each Receipt this Period

115.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Dan Cronin

Mailing Address 371 S Mitchell Ave

City

Elmhurst

State

IL

Zip Code

60126-3905

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
State of Illinois

Occupation  
State Senator

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 0 4 / 2 0 0 8

Transaction ID: 80916.C290780

Amount of Each Receipt this Period

600.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Tom Cross

Mailing Address 24047 W Lockport St Ste 201

City

Plainfield

State

IL

Zip Code

60544-1680

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
State of Illinois

Occupation  
State Representative

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 0 4 / 2 0 0 8

Transaction ID: 80916.C290469

Amount of Each Receipt this Period

600.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

1315.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 19 / 128

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

Illinois Republican Party

**A.**

Full Name (Last, First, Middle Initial)

James Cull

Mailing Address 3048 N. Greenview Ave.

City

Chicago

State

IL

Zip Code

60657-3115

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self-Employed

Occupation

Commodities Trader

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	0		2	0	0	8

Transaction ID: 80916.C291343

Amount of Each Receipt this Period

300.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Barrett Davie

Mailing Address P.O. Box 7929

City

Chicago

State

IL

Zip Code

60680

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
InStadium, Inc.

Occupation

EVP

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	2		2	0	0	8

Transaction ID: 80916.C290703

Amount of Each Receipt this Period

600.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Sharon Delawder

Mailing Address 429 E Stone Ave

City

Addison

State

IL

Zip Code

60101-2995

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	7		2	0	0	8

Transaction ID: 80917.C292191

Amount of Each Receipt this Period

250.00

Receipt

SUBTOTAL of Receipts This Page (optional) .....

1150.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 20 / 128

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Illinois Republican Party

**A.**

Full Name (Last, First, Middle Initial)

Anthony Digianfilippo

Mailing Address 830 Merrill Woods Rd

City

Hinsdale

State

IL

Zip Code

60521-2839

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
West Suburban Neuro Assoc.

Occupation  
Physician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 1 6 / 2 0 0 8

Transaction ID: 80916.C292065

Amount of Each Receipt this Period

400.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Ronald Dobrunz

Mailing Address 1517 Roxbury Ct.

City

Davis

State

IL

Zip Code

61019-9650

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 2 9 / 2 0 0 8

Transaction ID: 81010.C292895

Amount of Each Receipt this Period

50.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Dennis Doligala

Mailing Address 5858 N. Sheridan Rd., Apt. 1208

City

Chicago

State

IL

Zip Code

60660-4919

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
State of Illinois

Occupation  
Case Worker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 1 2 / 2 0 0 8

Transaction ID: 80916.C291780

Amount of Each Receipt this Period

50.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

500.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 21 / 128

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Illinois Republican Party

A.

Full Name (Last, First, Middle Initial)

Daniel Donahue

Mailing Address 34 Carlton circle

City

Barrington

State

IL

Zip Code

60010

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NoneOccupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 1 1 / 2 0 0 8

Transaction ID: 80916.C291681

Amount of Each Receipt this Period

200.00

Receipt

B.

Full Name (Last, First, Middle Initial)

Douglas Drake

Mailing Address 418 Coronado Blvd.

City

Loves Park

State

IL

Zip Code

61111

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NoneOccupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 0 3 / 2 0 0 8

Transaction ID: 80916.C290698

Amount of Each Receipt this Period

200.00

Receipt

C.

Full Name (Last, First, Middle Initial)

Douglas Drake

Mailing Address 418 Coronado Blvd.

City

Loves Park

State

IL

Zip Code

61111

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NoneOccupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 1 7 / 2 0 0 8

Transaction ID: 80917.C292220

Amount of Each Receipt this Period

200.00

Receipt

SUBTOTAL of Receipts This Page (optional) .....

600.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 22 / 128

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Illinois Republican Party

**A.**

Full Name (Last, First, Middle Initial)

Harlan England

Mailing Address 576 Knox Rd. 1300 E

City

Maquon

State

IL

Zip Code

61458-9630

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self-Employed

Occupation  
Farmer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 0 8 / 2 0 0 8

Transaction ID: 80916.C291074

Amount of Each Receipt this Period

100.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Arthur Fanter

Mailing Address 17 White Oak Dr

City

Coal Valley

State

IL

Zip Code

61240-9571

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 2 9 / 2 0 0 8

Transaction ID: 81010.C292943

Amount of Each Receipt this Period

100.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Hilton Fernandez

Mailing Address 426 W Surf St Apt 402

City

Chicago

State

IL

Zip Code

60657-6131

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Convenient Food Mart

Occupation  
Clerk

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 3 0 / 2 0 0 8

Transaction ID: 81010.C293060

Amount of Each Receipt this Period

50.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

250.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 23 / 128

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Illinois Republican Party

**A.**

Full Name (Last, First, Middle Initial)

Harriet Fields

Mailing Address 2821 Natalie Dr

City

Champaign

State

IL

Zip Code

61822-7359

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

410.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 2 3 / 2 0 0 8

Transaction ID: 81010.C292729

Amount of Each Receipt this Period

250.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Patricia Forkan

Mailing Address 305 Ambriance Dr.

City

Burr Ridge

State

IL

Zip Code

60527

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
TLC Learning Center

Occupation  
Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 2 9 / 2 0 0 8

Transaction ID: 81010.C292787

Amount of Each Receipt this Period

250.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

William Fox

Mailing Address 303 E. Orleans St.

City

Paxton

State

IL

Zip Code

60957

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 1 6 / 2 0 0 8

Transaction ID: 80916.C292107

Amount of Each Receipt this Period

40.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

540.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 24 / 128

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Illinois Republican Party

**A.**

Full Name (Last, First, Middle Initial)

Elizabeth Frigy

Mailing Address 2163 W Ravina Park Rd

City

Decatur

State

IL

Zip Code

62526-3067

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
School District 61

Occupation  
Nurse

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

110.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 0 8 / 2 0 0 8

Transaction ID: 80916.C291017

Amount of Each Receipt this Period

110.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Elizabeth Frigy

Mailing Address 2163 W Ravina Park Rd

City

Decatur

State

IL

Zip Code

62526-3067

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
School District 61

Occupation  
Nurse

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 1 1 / 2 0 0 8

Transaction ID: 80916.C291597

Amount of Each Receipt this Period

200.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Eunice Friske

Mailing Address 2310 S 11th Ave

City

Broadview

State

IL

Zip Code

60155-4034

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 1 7 / 2 0 0 8

Transaction ID: 80917.C292209

Amount of Each Receipt this Period

100.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

410.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 25 / 128

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Illinois Republican Party

**A.**

Full Name (Last, First, Middle Initial)

Roark Fritz

Mailing Address 1341 Naperville Road

City

Plainfield

State

IL

Zip Code

60544-7970

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Lucent Technologies

Occupation  
Engineer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 1 2 / 2 0 0 8

Transaction ID: 80916.C291792

Amount of Each Receipt this Period

110.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

James Froemming

Mailing Address P.O. BOX 6893

City

Rockford

State

IL

Zip Code

61125-1893

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 1 0 / 2 0 0 8

Transaction ID: 80916.C291307

Amount of Each Receipt this Period

200.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Dennis Galinsky

Mailing Address 637 Dauphine Ct

City

Northbrook

State

IL

Zip Code

60062-2256

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Nuclear Oncology

Occupation  
Oncologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 1 9 / 2 0 0 8

Transaction ID: 80920.C292439

Amount of Each Receipt this Period

150.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

460.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 26 / 128

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Illinois Republican Party

**A.**

Full Name (Last, First, Middle Initial)

James Gibson

Mailing Address 46 Delburne Dr.

City

Davis

State

IL

Zip Code

61019-9540

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 1 1 / 2 0 0 8

Transaction ID: 80916.C291566

Amount of Each Receipt this Period

115.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Kimberly Godden

Mailing Address 1060 N Hermitage Ave

City

Chicago

State

IL

Zip Code

60622-3240

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Superior Ambulance

Occupation  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 0 2 / 2 0 0 8

Transaction ID: 80916.C290701

Amount of Each Receipt this Period

600.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Mark Gravdal

Mailing Address 297 Cascade Drive

City

Crystal Lake

State

IL

Zip Code

60012-3345

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Walgreens

Occupation  
Pharmacist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 0 5 / 2 0 0 8

Transaction ID: 80916.C290888

Amount of Each Receipt this Period

250.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

965.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 27 / 128

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Illinois Republican Party

**A.**

Full Name (Last, First, Middle Initial)

Judith Gray

Mailing Address 9 Ridgeview Dr

City

Springfield

State

IL

Zip Code

62711-9404

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NoneOccupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	8		2	0	0	8

Transaction ID: 80916.C291030

Amount of Each Receipt this Period

1200.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Lorraine Greenberg

Mailing Address 4712 Royal Melbourne Dr

City

Long Grove

State

IL

Zip Code

60047-5217

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Roosevelt CapitalOccupation  
Self-Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1800.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	2		2	0	0	8

Transaction ID: 80916.C290712

Amount of Each Receipt this Period

600.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Thomas Grimes, II

Mailing Address P.O. Box 424

City

Blue Mound

State

IL

Zip Code

62513-0424

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information RequestedOccupation  
Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	0		2	0	0	8

Transaction ID: 80916.C291318

Amount of Each Receipt this Period

230.00

Receipt

SUBTOTAL of Receipts This Page (optional) .....

2030.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 28 / 128

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Illinois Republican Party

**A.**

Full Name (Last, First, Middle Initial)

Jon Hagstrom

Mailing Address 317 Hudson Ave.

City

Clarendon Hills

State

IL

Zip Code

60514-1331

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Chicago Bridge & Iron Co.

Occupation  
Engineer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 0 5 / 2 0 0 8

Transaction ID: 80916.C290910

Amount of Each Receipt this Period

100.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Milnore Hall

Mailing Address 1500 Sheridan Rd Unit TL

City

Wilmette

State

IL

Zip Code

60091-1879

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 1 6 / 2 0 0 8

Transaction ID: 80916.C292058

Amount of Each Receipt this Period

100.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Brent Hapke

Mailing Address 1632 E 2775th St

City

Clayton

State

IL

Zip Code

62324-2104

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self-Employed

Occupation  
Farmer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 1 0 / 2 0 0 8

Transaction ID: 80916.C291432

Amount of Each Receipt this Period

300.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

500.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 29 / 128

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Illinois Republican Party

**A.**

Full Name (Last, First, Middle Initial)

Minnie Hartke

Mailing Address 23957 Woodland Road

City

Litchfield

State

IL

Zip Code

62056-5017

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 0 9 / 2 0 0 8

Transaction ID: 80916.C291208

Amount of Each Receipt this Period

60.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

John Hayes

Mailing Address 18434 California Ave.

City

Homewood

State

IL

Zip Code

60430-2815

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
U.S. Army

Occupation  
Engineer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 1 0 / 2 0 0 8

Transaction ID: 80916.C291329

Amount of Each Receipt this Period

75.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Jessie Hill

Mailing Address 1924 W. Ashbury Ln.

City

Inverness

State

IL

Zip Code

60067-4796

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 1 1 / 2 0 0 8

Transaction ID: 80916.C291680

Amount of Each Receipt this Period

100.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

235.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 30 / 128

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Illinois Republican Party

**A.**

Full Name (Last, First, Middle Initial)

Edward Hines

Mailing Address 6 Old Hunt Rd.

City

Winnetka

State

IL

Zip Code

60093

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Edward Hines Lumber Co.

Occupation  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 2 3 / 2 0 0 8

Transaction ID: 81010.C292696

Amount of Each Receipt this Period

5000.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

R. H. Hoffmann

Mailing Address 5146 Belden Ave. N C2

City

Downers Grove

State

IL

Zip Code

60515-4766

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 1 0 / 2 0 0 8

Transaction ID: 80916.C291457

Amount of Each Receipt this Period

200.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Don Hollandsworth

Mailing Address 1624 Tina Ln.

City

Flossmoor

State

IL

Zip Code

60422-1953

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Midwest Physician Group

Occupation  
Physician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 1 2 / 2 0 0 8

Transaction ID: 80916.C291743

Amount of Each Receipt this Period

75.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

5275.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 31 / 128

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Illinois Republican Party

**A.**

Full Name (Last, First, Middle Initial)

Walter Holstine

Mailing Address P.O. Box 246

City

Reynolds

State

IL

Zip Code

61279-0246

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 3 0 / 2 0 0 8

Transaction ID: 81010.C293000

Amount of Each Receipt this Period

100.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Patti Howard

Mailing Address 1011 N Court St

City

Marion

State

IL

Zip Code

62959-1609

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation  
Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 0 4 / 2 0 0 8

Transaction ID: 80916.C290276

Amount of Each Receipt this Period

600.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

R. C. Hudson

Mailing Address 1330 Edgewood Lane

City

Northbrook

State

IL

Zip Code

60062

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
H. D. Hudson, Inc.

Occupation  
Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 2 9 / 2 0 0 8

Transaction ID: 81010.C292910

Amount of Each Receipt this Period

300.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

1000.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 32 / 128

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Illinois Republican Party

**A.**

Full Name (Last, First, Middle Initial)

Thomas Huiner

Mailing Address 9S524 Lorraine Dr.

City

Hinsdale

State

IL

Zip Code

60521-7021

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 0 2 / 2 0 0 8

Transaction ID: 80916.C290615

Amount of Each Receipt this Period

100.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Randall Hultgren

Mailing Address PO Box 567

City

Winfield

State

IL

Zip Code

60190-0567

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
State of Illinois

Occupation  
State Senator

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 0 8 / 2 0 0 8

Transaction ID: 80916.C291023

Amount of Each Receipt this Period

300.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

James Hurst

Mailing Address 3876 Hudson Rd

City

Auburn

State

IL

Zip Code

62615-9225

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 0 5 / 2 0 0 8

Transaction ID: 80916.C290916

Amount of Each Receipt this Period

200.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

600.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 33 / 128

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Illinois Republican Party

**A.**

Full Name (Last, First, Middle Initial)

Merle Inman

Mailing Address RR 1 Box 50

City

Batchtown

State

IL

Zip Code

62006-9706

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 0 9 / 2 0 0 8

Transaction ID: 80916.C291117

Amount of Each Receipt this Period

150.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Merle Inman

Mailing Address RR 1 Box 50

City

Batchtown

State

IL

Zip Code

62006-9706

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 2 3 / 2 0 0 8

Transaction ID: 81010.C292694

Amount of Each Receipt this Period

150.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Stephen Izzo

Mailing Address 2730 Summit Dr

City

Glenview

State

IL

Zip Code

60025-7633

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Zonatherm Products

Occupation  
President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 1 8 / 2 0 0 8

Transaction ID: 80918.C292409

Amount of Each Receipt this Period

300.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

600.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 34 / 128

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Illinois Republican Party

**A.**

Full Name (Last, First, Middle Initial)

Christopher Jansen

Mailing Address P.O. BOX 3909

City

St. Charles

State

IL

Zip Code

60174-9084

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self-Employed

Occupation  
Investor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 2 9 / 2 0 0 8

Transaction ID: 81010.C292915

Amount of Each Receipt this Period

200.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Paul Jasper

Mailing Address 289 S South Shore Ln

City

Lake Forest

State

IL

Zip Code

60045-4807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Covered Logistics & Trans-  
porta

Occupation  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 3 0 / 2 0 0 8

Transaction ID: 81010.C292995

Amount of Each Receipt this Period

100.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

D. Patricia Jennett

Mailing Address 416 Deepwood Ct

City

Naperville

State

IL

Zip Code

60540-8140

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation  
Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 2 3 / 2 0 0 8

Transaction ID: 81010.C292676

Amount of Each Receipt this Period

100.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

400.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 35 / 128

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Illinois Republican Party

**A.**

Full Name (Last, First, Middle Initial)

Hagard Johnson

Mailing Address 6649 N. Kilpatrick

City

Lincolnwood

State

IL

Zip Code

60712-3307

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 0 5 / 2 0 0 8

Transaction ID: 80916.C290928

Amount of Each Receipt this Period

100.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Hagard Johnson

Mailing Address 6649 N. Kilpatrick

City

Lincolnwood

State

IL

Zip Code

60712-3307

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 2 9 / 2 0 0 8

Transaction ID: 81010.C292921

Amount of Each Receipt this Period

100.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

John Johnson

Mailing Address 1707 Bentbrook Dr.

City

Champaign

State

IL

Zip Code

61821-9219

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self-Employed

Occupation

Real Estate

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 1 6 / 2 0 0 8

Transaction ID: 80916.C292055

Amount of Each Receipt this Period

50.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

250.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Illinois Republican Party

**A.**

Full Name (Last, First, Middle Initial)

Wayne Johnson

Mailing Address 1801 S Vine St

City

Urbana

State

IL

Zip Code

61801-5833

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 0 8 / 2 0 0 8

Transaction ID: 80916.C291024

Amount of Each Receipt this Period

600.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Tim Kelly

Mailing Address 107 Interlacken Rd

City

Springfield

State

IL

Zip Code

62704-3200

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self-Employed

Occupation

Programmer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 1 0 / 2 0 0 8

Transaction ID: 80916.C291433

Amount of Each Receipt this Period

50.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Tim Kelly

Mailing Address 107 Interlacken Rd

City

Springfield

State

IL

Zip Code

62704-3200

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self-Employed

Occupation

Programmer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 3 0 / 2 0 0 8

Transaction ID: 81010.C293005

Amount of Each Receipt this Period

70.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

720.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Illinois Republican Party

**A.**

Full Name (Last, First, Middle Initial)

Christopher Kiczula

Mailing Address 3644 W Belmont Ave

City

Chicago

State

IL

Zip Code

60618-5328

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

570.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 2 9 / 2 0 0 8

Transaction ID: 81010.C292754

Amount of Each Receipt this Period

50.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Ira Kilgus

Mailing Address 10 Timber Ridge Dr

City

Fairbury

State

IL

Zip Code

61739-9500

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 2 2 / 2 0 0 8

Transaction ID: 81010.C292607

Amount of Each Receipt this Period

200.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Ira Kilgus

Mailing Address 10 Timber Ridge Dr

City

Fairbury

State

IL

Zip Code

61739-9500

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 3 0 / 2 0 0 8

Transaction ID: 81010.C292989

Amount of Each Receipt this Period

100.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

350.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 38 / 128

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Illinois Republican Party

**A.**

Full Name (Last, First, Middle Initial)

Thomas Klett

Mailing Address 947 W. Washington Ave.

City

Park Ridge

State

IL

Zip Code

60068-2670

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NoneOccupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	8		2	0	0	8

Transaction ID: 80918.C292394

Amount of Each Receipt this Period

25.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

John Koten

Mailing Address 271 Otis Rd.

City

Barrington

State

IL

Zip Code

60010-5123

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NoneOccupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		3	0		2	0	0	8

Transaction ID: 81010.C292999

Amount of Each Receipt this Period

300.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Stanley Kozuch

Mailing Address 19503 E 2200 North Rd

City

Towanda

State

IL

Zip Code

61776-9319

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NoneOccupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		3	0		2	0	0	8

Transaction ID: 81010.C293094

Amount of Each Receipt this Period

200.00

Receipt

SUBTOTAL of Receipts This Page (optional) .....

525.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 39 / 128

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Illinois Republican Party

**A.**

Full Name (Last, First, Middle Initial)

Joyce Lanzotti

Mailing Address 2000 E Hazel Dell Rd

City

Springfield

State

IL

Zip Code

62703-5278

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation

Homemaker

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 1 7 / 2 0 0 8

Transaction ID: 80917.C292243

Amount of Each Receipt this Period

150.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Peter Lardner

Mailing Address 2828 96th Avenue Court

City

Milan

State

IL

Zip Code

61264

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Lee Enterprises, Inc.

Occupation

Systems Administrator

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 2 9 / 2 0 0 8

Transaction ID: 81010.C292769

Amount of Each Receipt this Period

250.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Mark Levey

Mailing Address 574 W Hawthorne Pl

City

Chicago

State

IL

Zip Code

60657-2923

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Lotsoff Capital Management  
Inc

Occupation

Partner

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 1 1 / 2 0 0 8

Transaction ID: 80916.C291624

Amount of Each Receipt this Period

250.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

650.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 40 / 128

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Illinois Republican Party

**A.**

Full Name (Last, First, Middle Initial)

Don Lien

Mailing Address 390 N River Glen Ave

City

Elmhurst

State

IL

Zip Code

60126-2110

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self-Employed

Occupation  
Sales

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 1 7 / 2 0 0 8

Transaction ID: 80917.C292199

Amount of Each Receipt this Period

100.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Don Lien

Mailing Address 390 N River Glen Ave

City

Elmhurst

State

IL

Zip Code

60126-2110

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self-Employed

Occupation  
Sales

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 2 9 / 2 0 0 8

Transaction ID: 81010.C292938

Amount of Each Receipt this Period

100.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Jane Lindgren

Mailing Address 15230 S. James #205

City

Plainfield

State

IL

Zip Code

60544-1551

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

395.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 1 7 / 2 0 0 8

Transaction ID: 80917.C292173

Amount of Each Receipt this Period

50.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

250.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 41 / 128

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Illinois Republican Party

**A.**

Full Name (Last, First, Middle Initial)

Flo Luechtefeld

Mailing Address 1402 Lakeview Ct

City

Okawville

State

IL

Zip Code

62271-1195

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 0 8 / 2 0 0 8

Transaction ID: 80916.C291027

Amount of Each Receipt this Period

600.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Arthur Lyons

Mailing Address 4035 Central Ave.

City

Western Springs

State

IL

Zip Code

60558-1111

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 2 9 / 2 0 0 8

Transaction ID: 81010.C292810

Amount of Each Receipt this Period

330.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Alex Machinis

Mailing Address 1827 Dover Ct.

City

Arlington Heights

State

IL

Zip Code

60004-4246

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Empower Geographics, Inc.

Occupation  
Software Developer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

705.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 3 0 / 2 0 0 8

Transaction ID: 81010.C293031

Amount of Each Receipt this Period

250.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

1180.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 42 / 128

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Illinois Republican Party

**A.**

Full Name (Last, First, Middle Initial)

Douglas MacLeod

Mailing Address 1709 N. North Park

City

Chicago

State

IL

Zip Code

60614-6374

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 0 4 / 2 0 0 8

Transaction ID: 80916.C290835

Amount of Each Receipt this Period

50.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Lynn Maddox

Mailing Address 2130 N. Lincoln Park West  
Apt. 13-S

City

Chicago

State

IL

Zip Code

60614-4649

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Stine, Roe & Farnham

Occupation  
Management

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 1 9 / 2 0 0 8

Transaction ID: 80920.C292442

Amount of Each Receipt this Period

250.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Terrence Martin

Mailing Address 726 Community Dr Apt 38

City

Belleville

State

IL

Zip Code

62223-1027

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 1 2 / 2 0 0 8

Transaction ID: 80916.C291793

Amount of Each Receipt this Period

550.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

850.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 43 / 128

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Illinois Republican Party

**A.**

Full Name (Last, First, Middle Initial)

John Mason

Mailing Address 1506 Rivercrest Road

City

Danville

State

IL

Zip Code

61832-1630

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Canle Clinic

Occupation  
Physician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 3 0 / 2 0 0 8

Transaction ID: 81010.C293085

Amount of Each Receipt this Period

225.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

E. Davison Massey

Mailing Address 133 Chestnut St

City

Winnetka

State

IL

Zip Code

60093-3809

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self-Employed

Occupation  
Investor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 1 9 / 2 0 0 8

Transaction ID: 80920.C292467

Amount of Each Receipt this Period

150.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Charlotte McGhee

Mailing Address 3651 N. Karen Ct.

City

Decatur

State

IL

Zip Code

62526-1431

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation  
Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 0 3 / 2 0 0 8

Transaction ID: 80916.C290666

Amount of Each Receipt this Period

100.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

475.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 44 / 128

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Illinois Republican Party

A.

Full Name (Last, First, Middle Initial)

Charlotte McGhee

Mailing Address 3651 N. Karen Ct.

City

Decatur

State

IL

Zip Code

62526-1431

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Information Requested

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 1 7 / 2 0 0 8

Transaction ID: 80917.C292244

Amount of Each Receipt this Period

100.00

Receipt

B.

Full Name (Last, First, Middle Initial)

Scott Metzler

Mailing Address 3202 Royal Fox Drive

City

St. Charles

State

IL

Zip Code

60174-8738

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self-Employed

Occupation

Construction

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 1 1 / 2 0 0 8

Transaction ID: 80916.C291668

Amount of Each Receipt this Period

500.00

Receipt

C.

Full Name (Last, First, Middle Initial)

Veva Meyer

Mailing Address 24084 N. Lakeside Dr.

City

Lake Zurich

State

IL

Zip Code

60047-8846

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation

Retired

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 1 6 / 2 0 0 8

Transaction ID: 80916.C292061

Amount of Each Receipt this Period

100.00

Receipt

SUBTOTAL of Receipts This Page (optional) .....

700.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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FOR LINE NUMBER: PAGE 45 / 128

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Illinois Republican Party

**A.**

Full Name (Last, First, Middle Initial)

Jack Miller

Mailing Address 485 Half Day Rd Ste 200

City

Lincolnshire

State

IL

Zip Code

60069-2933

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Quill Corporation

Occupation  
Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 1 1 / 2 0 0 8

Transaction ID: 80916.C291559

Amount of Each Receipt this Period

10000.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Robert Miller

Mailing Address 345 Malden Ave.

City

La Grange

State

IL

Zip Code

60526

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 1 2 / 2 0 0 8

Transaction ID: 80916.C291765

Amount of Each Receipt this Period

100.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Gregg Minkow

Mailing Address 330 Oak Knoll Ter.

City

Northbrook

State

IL

Zip Code

60062-1048

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Hinshaw & Culbertson

Occupation  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 3 0 / 2 0 0 8

Transaction ID: 81010.C293088

Amount of Each Receipt this Period

125.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

10225.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 46 / 128

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Illinois Republican Party

**A.**

Full Name (Last, First, Middle Initial)

Aidan Mullett

Mailing Address 1187 Hawkweed Lane

City

Lake Forest

State

IL

Zip Code

60045-1101

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Carney Management Co.

Occupation

Investment Management

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

950.00

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 2 9 / 2 0 0 8

Transaction ID: 81010.C292857

Amount of Each Receipt this Period

200.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Terry Nelson

Mailing Address 326 N 2nd St

City

Chillicothe

State

IL

Zip Code

61523-2152

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Manager

Occupation

Halide Welding

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 0 5 / 2 0 0 8

Transaction ID: 80916.C290899

Amount of Each Receipt this Period

300.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

John Nickels

Mailing Address 17901 Owens Rd.

City

Maple Park

State

IL

Zip Code

60151-5225

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 0 2 / 2 0 0 8

Transaction ID: 80916.C290548

Amount of Each Receipt this Period

300.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

800.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER: PAGE 47 / 128

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

Illinois Republican Party

A.

Full Name (Last, First, Middle Initial)

Robert Olson

Mailing Address 460 Reserve Drive

City

Crystal Lake

State

IL

Zip Code

60012

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Dressta North America LtdOccupation  
President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 3 0 / 2 0 0 8

Transaction ID: 81010.C293028

Amount of Each Receipt this Period

100.00

Receipt

B.

Full Name (Last, First, Middle Initial)

Jo Ann Osmond

Mailing Address 26133 W Grass Lake Rd

City

Antioch

State

IL

Zip Code

60002-7106

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
State of IllinoisOccupation  
Representative

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 0 8 / 2 0 0 8

Transaction ID: 80916.C291048

Amount of Each Receipt this Period

600.00

Receipt

C.

Full Name (Last, First, Middle Initial)

James Ozinga

Mailing Address 8139 Elizabeth Avenue

City

Orland Park

State

IL

Zip Code

60462

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Ozinga BrothersOccupation  
Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 2 9 / 2 0 0 8

Transaction ID: 81010.C292852

Amount of Each Receipt this Period

10000.00

Receipt

SUBTOTAL of Receipts This Page (optional) .....

10700.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 48 / 128

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Illinois Republican Party

**A.**

Full Name (Last, First, Middle Initial)

Martin Ozinga

Mailing Address 12621 W. Hadley

City

Homer Glen

State

IL

Zip Code

60491

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Ozinga Brothers

Occupation  
Owner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 2 3 / 2 0 0 8

Transaction ID: 81010.C292627

Amount of Each Receipt this Period

10000.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Richard Ozinga

Mailing Address 12112 S 69th Ave

City

Palos Heights

State

IL

Zip Code

60463

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Ozinga Brothers

Occupation  
Partner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 3 0 / 2 0 0 8

Transaction ID: 81010.C293001

Amount of Each Receipt this Period

10000.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Ruth Ozinga

Mailing Address 12621 W. Hadley

City

Homer Glen

State

IL

Zip Code

60491

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation  
Homemaker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 2 3 / 2 0 0 8

Transaction ID: 81010.C292628

Amount of Each Receipt this Period

10000.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

30000.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Illinois Republican Party

**A.**

Full Name (Last, First, Middle Initial)

Peer Pedersen

Mailing Address 161 N. Clark St., Suite 3100

City

Chicago

State

IL

Zip Code

60601-3221

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Pedersen & Houpt

Occupation  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 2 9 / 2 0 0 8

Transaction ID: 81010.C292854

Amount of Each Receipt this Period

1000.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Clark Pellett

Mailing Address 800 S. Wells St., Unit 1012

City

Chicago

State

IL

Zip Code

60607-4322

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
WorldCom, Inc.

Occupation  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 0 2 / 2 0 0 8

Transaction ID: 80916.C290713

Amount of Each Receipt this Period

600.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Ron Peterson

Mailing Address P.O. Box 531

City

La Harpe

State

IL

Zip Code

61450-0531

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
First State Bank of West-  
ern IL

Occupation  
Banker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 1 8 / 2 0 0 8

Transaction ID: 80918.C292351

Amount of Each Receipt this Period

100.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

1700.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 50 / 128

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Illinois Republican Party

**A.**

Full Name (Last, First, Middle Initial)

Robert Pettett

Mailing Address 169 Fieldcrest Court

City

Grayslake

State

IL

Zip Code

60030-9382

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Information Requested

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 0 9 / 2 0 0 8

Transaction ID: 80916.C291174

Amount of Each Receipt this Period

100.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Robert Phelps

Mailing Address 1500 Hinman Ave., Apt. 301

City

Evanston

State

IL

Zip Code

60201

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation

Retired

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 0 9 / 2 0 0 8

Transaction ID: 80916.C291239

Amount of Each Receipt this Period

125.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Morris Pieper

Mailing Address 202 W Lincoln St

City

Mount Morris

State

IL

Zip Code

61054-1416

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Information Requested

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

215.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 0 3 / 2 0 0 8

Transaction ID: 80916.C290746

Amount of Each Receipt this Period

75.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

300.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 51 / 128

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Illinois Republican Party

**A.**

Full Name (Last, First, Middle Initial)

Dennis Pignotti

Mailing Address 105 Prairie Ridge Drive

City

Lexington

State

IL

Zip Code

61753-4508

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 1 7 / 2 0 0 8

Transaction ID: 80917.C292163

Amount of Each Receipt this Period

150.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

David Port

Mailing Address 311 W Main St

City

Carmi

State

IL

Zip Code

62821-1486

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Carmi Chamber of Commerce

Occupation  
Executive Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 1 9 / 2 0 0 8

Transaction ID: 80920.C292422

Amount of Each Receipt this Period

250.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Sherman Power

Mailing Address 1348 Jane Ave

City

Naperville

State

IL

Zip Code

60540-5805

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation  
Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 1 7 / 2 0 0 8

Transaction ID: 80917.C292223

Amount of Each Receipt this Period

200.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

600.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 52 / 128

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Illinois Republican Party

**A.**

Full Name (Last, First, Middle Initial)

Linda Powers

Mailing Address 1323 W Pratt Blvd # 3

City

Chicago

State

IL

Zip Code

60626-4336

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CNA Corp.

Occupation

Government Relations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 1 0 / 2 0 0 8

Transaction ID: 80916.C291483

Amount of Each Receipt this Period

200.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Peter Pratt

Mailing Address 35982 W County Line Rd

City

Kirkland

State

IL

Zip Code

60146-8224

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self-Employed

Occupation

Real Estate

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 1 2 / 2 0 0 8

Transaction ID: 80916.C291725

Amount of Each Receipt this Period

50.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

George Preckwinkle

Mailing Address 825 S Lincoln Ave

City

Springfield

State

IL

Zip Code

62704-2328

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Ace Hardware Store

Occupation

Owner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 2 9 / 2 0 0 8

Transaction ID: 81010.C292830

Amount of Each Receipt this Period

250.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

500.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 53 / 128

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Illinois Republican Party

**A.**

Full Name (Last, First, Middle Initial)

Marjorie Reed

Mailing Address 301 W. Laurel Ave.

City

Lake Forest

State

IL

Zip Code

60045-7780

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation  
Housewife

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 0 2 / 2 0 0 8

Transaction ID: 80916.C290653

Amount of Each Receipt this Period

300.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Anne Reyes

Mailing Address 735 East Westminster

City

Lake Forest

State

IL

Zip Code

60045

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation  
Housewife

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 1 0 / 2 0 0 8

Transaction ID: 80916.C291504

Amount of Each Receipt this Period

10000.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Christopher Reyes

Mailing Address 735 E Westminster Rd

City

Lake Forest

State

IL

Zip Code

60045-2232

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Reyes Holdings, LLC

Occupation  
Chairman

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 1 0 / 2 0 0 8

Transaction ID: 80916.C291502

Amount of Each Receipt this Period

10000.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

20300.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 54 / 128

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

Illinois Republican Party

**A.**

Full Name (Last, First, Middle Initial)

Richard Robb

Mailing Address 17 Woodley Road

City

Winnetka

State

IL

Zip Code

60093-3738

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Henry Crown & Co.

Occupation

Vice President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	1		2	0	0	8

Transaction ID: 80916.C291558

Amount of Each Receipt this Period

5000.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Lester Rosenberg

Mailing Address 350 W Hubbard St Ste 350

City

Chicago

State

IL

Zip Code

60610-4098

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1800.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	1		2	0	0	8

Transaction ID: 80916.C291557

Amount of Each Receipt this Period

1800.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Joseph Rudish

Mailing Address 5704 S Nashville Ave

City

Chicago

State

IL

Zip Code

60638-3321

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	9		2	0	0	8

Transaction ID: 80916.C291183

Amount of Each Receipt this Period

50.00

Receipt

SUBTOTAL of Receipts This Page (optional) .....

6850.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 55 / 128

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Illinois Republican Party

**A.**

Full Name (Last, First, Middle Initial)

Robert Runkle

Mailing Address PO Box 280

City

Altona

State

IL

Zip Code

61414-0280

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 1 1 / 2 0 0 8

Transaction ID: 80916.C291610

Amount of Each Receipt this Period

200.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Alfred Sacha

Mailing Address 7114 N. Keystone Avenue

City

Lincolnwood

State

IL

Zip Code

60712-2324

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self-Employed

Occupation  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 1 1 / 2 0 0 8

Transaction ID: 80916.C291612

Amount of Each Receipt this Period

150.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Anna Scott

Mailing Address 309 W Michigan Ave

City

Urbana

State

IL

Zip Code

61801-4945

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Parkland College

Occupation  
Professor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 0 9 / 2 0 0 8

Transaction ID: 80916.C291120

Amount of Each Receipt this Period

100.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

450.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 56 / 128

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Illinois Republican Party

**A.**

Full Name (Last, First, Middle Initial)

James Seitz

Mailing Address 425 Benjamin Dr Apt 208

City

Vernon Hills

State

IL

Zip Code

60061-1583

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

410.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 2 2 / 2 0 0 8

Transaction ID: 81010.C292618

Amount of Each Receipt this Period

100.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Sharon Sennett

Mailing Address 419 S Oak St

City

Hinsdale

State

IL

Zip Code

60521-4629

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation  
Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 1 5 / 2 0 0 8

Transaction ID: 80916.C291881

Amount of Each Receipt this Period

250.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Marybeth Shea

Mailing Address 615 W Deming Pl

City

Chicago

State

IL

Zip Code

60614-2776

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 1 9 / 2 0 0 8

Transaction ID: 80920.C292421

Amount of Each Receipt this Period

1000.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

1350.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 57 / 128

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Illinois Republican Party

**A.**

Full Name (Last, First, Middle Initial)

Zbigniew Skirucha

Mailing Address 1570 W Wiesbrook Rd

City

Wheaton

State

IL

Zip Code

60187-7205

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
ERA Industrial

Occupation

Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 1 7 / 2 0 0 8

Transaction ID: 80917.C292221

Amount of Each Receipt this Period

100.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Ruth Skriden

Mailing Address 326 Park Ave Apt 27

City

Clarendon Hills

State

IL

Zip Code

60514-1366

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 1 7 / 2 0 0 8

Transaction ID: 80917.C292224

Amount of Each Receipt this Period

50.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Evalyn Spinder

Mailing Address 134 Rue Vue Du Lac

City

East Peoria

State

IL

Zip Code

61611

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.00

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 1 1 / 2 0 0 8

Transaction ID: 80916.C291607

Amount of Each Receipt this Period

50.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

200.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 58 / 128

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Illinois Republican Party

**A.**

Full Name (Last, First, Middle Initial)

F. Alan Stamper

Mailing Address 55 Shuman Blvd Ste 700

City

Naperville

State

IL

Zip Code

60563-8422

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self-Employed

Occupation  
Sales

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 0 8 / 2 0 0 8

Transaction ID: 80916.C291014

Amount of Each Receipt this Period

100.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Frank Stamper

Mailing Address 432 Lakeside Rd

City

Crystal Lake

State

IL

Zip Code

60014-5626

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 0 5 / 2 0 0 8

Transaction ID: 80916.C290989

Amount of Each Receipt this Period

100.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Linda Stark

Mailing Address 116 E. Chruch

City

Savoy

State

IL

Zip Code

61874-4432

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation  
Homemaker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 1 6 / 2 0 0 8

Transaction ID: 80916.C292062

Amount of Each Receipt this Period

250.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

450.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 59 / 128

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Illinois Republican Party

**A.**

Full Name (Last, First, Middle Initial)

Alan Stratton

Mailing Address 24029 S 80th Ave

City

Frankfort

State

IL

Zip Code

60423-8773

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 1 6 / 2 0 0 8

Transaction ID: 80916.C292109

Amount of Each Receipt this Period

200.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

William Strong

Mailing Address 904 N Green Bay Rd

City

Lake Forest

State

IL

Zip Code

60045-1709

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Morgan Stanley & Company

Occupation  
Investment Banker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 0 4 / 2 0 0 8

Transaction ID: 80916.C290282

Amount of Each Receipt this Period

600.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

William Swanson

Mailing Address 115 W. Main St.

City

East Galesburg

State

IL

Zip Code

61430-9739

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self-Employed

Occupation  
Farmer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 0 3 / 2 0 0 8

Transaction ID: 80916.C290747

Amount of Each Receipt this Period

100.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

900.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 60 / 128

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Illinois Republican Party

**A.**

Full Name (Last, First, Middle Initial)

William Swanson

Mailing Address 115 W. Main St.

City

East Galesburg

State

IL

Zip Code

61430-9739

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self-Employed

Occupation  
Farmer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 2 3 / 2 0 0 8

Transaction ID: 81010.C292708

Amount of Each Receipt this Period

100.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Elinor Swiger

Mailing Address 1933 Burr Oak Dr W

City

Glenview

State

IL

Zip Code

60025-1803

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self-Employed

Occupation  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 1 7 / 2 0 0 8

Transaction ID: 80917.C292147

Amount of Each Receipt this Period

100.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Leonard Tobey

Mailing Address PO Box 588  
P.O. Box 588

City

Herscher

State

IL

Zip Code

60941-0588

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self-Employed

Occupation  
Contractor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

305.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 1 9 / 2 0 0 8

Transaction ID: 80920.C292500

Amount of Each Receipt this Period

100.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

300.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 61 / 128

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Illinois Republican Party

**A.**

Full Name (Last, First, Middle Initial)

Margaret Tockstein

Mailing Address 9 Sandwedge Dr

City

Belleville

State

IL

Zip Code

62220-3209

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

315.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 1 1 / 2 0 0 8

Transaction ID: 80916.C291571

Amount of Each Receipt this Period

105.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Phil Truthart

Mailing Address PO Box 255

City

Kincaid

State

IL

Zip Code

62540-0255

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Secretary of State

Occupation  
A A III

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 0 9 / 2 0 0 8

Transaction ID: 80916.C291275

Amount of Each Receipt this Period

100.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Jeff Tutt

Mailing Address PO Box 429

City

Summit Argo

State

IL

Zip Code

60501-0429

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
National Indemnity Corp.

Occupation  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 1 5 / 2 0 0 8

Transaction ID: 80916.C291947

Amount of Each Receipt this Period

100.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

305.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 62 / 128

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Illinois Republican Party

**A.**

Full Name (Last, First, Middle Initial)

Jean Van Landingham

Mailing Address 4236 Westfield Drive

City

Rockford

State

IL

Zip Code

61101-6012

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation  
Housewife

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 1 7 / 2 0 0 8

Transaction ID: 80917.C292219

Amount of Each Receipt this Period

200.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

David Varnerin

Mailing Address 1901 N. Cleveland Ave., # E

City

Chicago

State

IL

Zip Code

60614-5215

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 2 9 / 2 0 0 8

Transaction ID: 81010.C292845

Amount of Each Receipt this Period

100.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Don Walker

Mailing Address 1212 N Lake Shore Dr # 9A

City

Chicago

State

IL

Zip Code

60610-2371

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Securitas Security Services

Occupation  
Chairman

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

305.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 1 0 / 2 0 0 8

Transaction ID: 80916.C291480

Amount of Each Receipt this Period

150.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

450.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 63 / 128

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Illinois Republican Party

**A.**

Full Name (Last, First, Middle Initial)

Jesse Werner

Mailing Address 26 Turnberry Pl.

City

Springfield

State

IL

Zip Code

62704-3559

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self-Employed

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 1 6 / 2 0 0 8

Transaction ID: 80916.C291994

Amount of Each Receipt this Period

200.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Marian Whitefield

Mailing Address PO Box 194

City

Bunker Hill

State

IL

Zip Code

62014-0194

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 1 0 / 2 0 0 8

Transaction ID: 80916.C291430

Amount of Each Receipt this Period

250.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Roger Williams

Mailing Address 24291 N. Forest Dr.

City

Lake Zurich

State

IL

Zip Code

60047-9060

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Northrup Grumman

Occupation

Electrical Engineer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 1 8 / 2 0 0 8

Transaction ID: 80918.C292417

Amount of Each Receipt this Period

90.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

540.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 64 / 128

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Illinois Republican Party

**A.**

Full Name (Last, First, Middle Initial)

Don Wilson

Mailing Address 10 South Riverside Plaza  
Suite 2100

City State Zip Code  
Chicago IL 60606

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
DRW Holdings

Occupation  
Derivatives Trader

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 1 9 / 2 0 0 8

Transaction ID: 80920.C292459

Amount of Each Receipt this Period

10000.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Lorraine Wink

Mailing Address 611 S. Oakland Ave.

City State Zip Code  
Villa Park IL 60181-3077

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
None

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 0 8 / 2 0 0 8

Transaction ID: 80916.C291003

Amount of Each Receipt this Period

50.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Paula Wolff

Mailing Address 4920 S Greenwood Ave

City State Zip Code  
Chicago IL 60615-2816

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Metropolis 20/20

Occupation  
Senior Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 1 0 / 2 0 0 8

Transaction ID: 80916.C291505

Amount of Each Receipt this Period

1500.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

11550.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 65 / 128

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Illinois Republican Party

**A.**

Full Name (Last, First, Middle Initial)

Elaine Wright

Mailing Address 281 Steeplechase Rd

City

Barrington

State

IL

Zip Code

60010-2637

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation

Homemaker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 2 2 / 2 0 0 8

Transaction ID: 81010.C292574

Amount of Each Receipt this Period

250.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

John Wymer

Mailing Address 67 Oak Creek Dr

City

Yorkville

State

IL

Zip Code

60560-9779

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Fairmount Minerals

Occupation

Vice President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 2 9 / 2 0 0 8

Transaction ID: 81010.C292777

Amount of Each Receipt this Period

200.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Todd Zoellick

Mailing Address 1450 N Astor St Apt 7C

City

Chicago

State

IL

Zip Code

60610-5704

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
US Department of Education

Occupation

Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 0 4 / 2 0 0 8

Transaction ID: 80916.C290278

Amount of Each Receipt this Period

600.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

1050.00

**TOTAL** This Period (last page this line number only) .....

137805.00

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 66 / 128

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Illinois Republican Party

<b>A.</b> Full Name (Last, First, Middle Initial) American Express Establishment Services	<b>Transaction ID:</b> 81010.E20026 <b>Date of Disbursement</b>																				
Mailing Address P.O. Box 53852	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>0</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		0	2		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	9		0	2		2	0	0	8												
City Phoenix State AZ Zip Code 85072-	Amount of Each Disbursement this Period																				
Purpose of Disbursement Credit Card Processing Candidate Name	<table border="1"> <tr> <td colspan="10">73.01</td> </tr> </table>	73.01																			
73.01																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
Category/Type CREDIT CARD PROCESSING																					
<b>B.</b> Full Name (Last, First, Middle Initial) American Express Establishment Services	<b>Transaction ID:</b> 81010.E20027 <b>Date of Disbursement</b>																				
Mailing Address P.O. Box 53852	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>0</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		0	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	9		0	4		2	0	0	8												
City Phoenix State AZ Zip Code 85072-	Amount of Each Disbursement this Period																				
Purpose of Disbursement Credit Card Processing Candidate Name	<table border="1"> <tr> <td colspan="10">55.80</td> </tr> </table>	55.80																			
55.80																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
Category/Type CREDIT CARD PROCESSING																					
<b>C.</b> Full Name (Last, First, Middle Initial) American Express Establishment Services	<b>Transaction ID:</b> 81015.E20279 <b>Date of Disbursement</b>																				
Mailing Address P.O. Box 53852	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		3	0		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	9		3	0		2	0	0	8												
City Phoenix State AZ Zip Code 85072-	Amount of Each Disbursement this Period																				
Purpose of Disbursement Credit Card Processing Candidate Name	<table border="1"> <tr> <td colspan="10">12.41</td> </tr> </table>	12.41																			
12.41																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
Category/Type CREDIT CARD PROCESSING																					

**SUBTOTAL** of Disbursements This Page (optional) .....

141.22

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 67 / 128

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Illinois Republican Party

**A.**

Full Name (Last, First, Middle Initial)  
Certy Merchant Relations

Mailing Address P.O. Box 30070 TA-02

City Tampa State FL Zip Code 33630-

Purpose of Disbursement  
Credit Card Processing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 81010.E20029

Date of Disbursement

/   /

Amount of Each Disbursement this Period

858.74

CREDIT CARD PROCESSING

**B.**

Full Name (Last, First, Middle Initial)  
Certy Merchant Relations

Mailing Address P.O. Box 30070 TA-02

City Tampa State FL Zip Code 33630-

Purpose of Disbursement  
Credit Card Processing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 81010.E20030

Date of Disbursement

/   /

Amount of Each Disbursement this Period

24.95

CREDIT CARD PROCESSING

**C.**

Full Name (Last, First, Middle Initial)  
Curt Conrad

Mailing Address 2704 Cronin Dr

City Springfield State IL Zip Code 62711-7083

Purpose of Disbursement  
REIMBURSEMENT: VOLUNTEER LUNCHES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 81014.E20274

Date of Disbursement

/   /

Amount of Each Disbursement this Period

225.05

REIMBURSEMENT: VOLUNTEER LUNCHES

**SUBTOTAL** of Disbursements This Page (optional) .....

1108.74

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 68 / 128

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Illinois Republican Party

**A.**

Full Name (Last, First, Middle Initial)  
Priscilla R. DePree

Mailing Address 1945 N Sheffield Ave Apt 203

City Chicago State IL Zip Code 60614-5551

Purpose of Disbursement  
REIMBURSEMENT: SEE BELOW

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 81010.E20110  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

709.17

REIMBURSEMENT: SEE BELOW

**B.**

Full Name (Last, First, Middle Initial)  
Copresco

Mailing Address 262 Commonwealth Drive

City Carol Stream State IL Zip Code 60188-

Purpose of Disbursement  
Party Printing Non-Candidate

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 81010.E20116  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

709.17

**[MEMO ITEM]**  
MEMO: PARTY PRINTING NON-CANDIDATE

**C.**

Full Name (Last, First, Middle Initial)  
EDonation 1 Account

Mailing Address 118 N. Saint Asaph St.

City Alexandria State VA Zip Code 22314-

Purpose of Disbursement  
Internet Fundraising Fee

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 80918.E19999  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

66.05

INTERNET FUNDRAISING FEE

**SUBTOTAL** of Disbursements This Page (optional) .....

775.22

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 69 / 128

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Illinois Republican Party

<b>A.</b> Full Name (Last, First, Middle Initial) EDonation 1 Account	<b>Transaction ID:</b> 81010.E20007 <b>Date of Disbursement</b>
Mailing Address 118 N. Saint Asaph St.	<div> <div>09</div> <div>29</div> <div>2008</div> </div>
City Alexandria State VA Zip Code 22314-	Amount of Each Disbursement this Period
Purpose of Disbursement Internet Fundraising Fee Candidate Name	<div>294.85</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
INTERNET FUNDRAISING FEE	
<b>B.</b> Full Name (Last, First, Middle Initial) Steve Ettinger	<b>Transaction ID:</b> 81014.E20253 <b>Date of Disbursement</b>
Mailing Address 1221 Larchmont Dr	<div> <div>09</div> <div>30</div> <div>2008</div> </div>
City Springfield State IL Zip Code 62704-2109	Amount of Each Disbursement this Period
Purpose of Disbursement REIMBURSEMENT: VOLUNTEER LUNCHES Candidate Name	<div>207.18</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
REIMBURSEMENT: VOLUNTEER LUNCHES	
<b>C.</b> Full Name (Last, First, Middle Initial) Gerald Graunke	<b>Transaction ID:</b> 81010.E20061 <b>Date of Disbursement</b>
Mailing Address 461 Oak Knoll Rd	<div> <div>09</div> <div>12</div> <div>2008</div> </div>
City Barrington Hills State IL Zip Code 60010-2619	Amount of Each Disbursement this Period
Purpose of Disbursement REIMBURSEMENT: See Below Candidate Name	<div>1229.20</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
REIMBURSEMENT: SEE BELOW	

**SUBTOTAL** of Disbursements This Page (optional) .....

**1731.23**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 70 / 128

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)  
 Illinois Republican Party

<b>A.</b> Full Name (Last, First, Middle Initial) Metropolitan Club Mailing Address 233 S Wacker Dr	<b>Transaction ID:</b> 81010.E20062 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 1 2 / 2 0 0 8</div> </div>
City Chicago State IL Zip Code 60606-6306 Purpose of Disbursement ROOM RENTAL & CATERING NO CANDIDATE Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Amount of Each Disbursement this Period</b> <div>1229.20</div> <b>[MEMO ITEM]</b> MEMO: ROOM RENTAL & CATERING NO CANDIDATE
<b>B.</b> Full Name (Last, First, Middle Initial) Millennium Hotel Minneapolis Mailing Address 1313 Nicollet Ave City Minneapolis State MN Zip Code 55403-2630 Purpose of Disbursement Hotel Rooms Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> 81010.E20008 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 3 0 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>324.48</div> HOTEL ROOMS
<b>C.</b> Full Name (Last, First, Middle Initial) Minnesota Coaches Mailing Address 425 East 31st Street City Hastings State MN Zip Code 55033- Purpose of Disbursement Bus Transportation Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> 81010.E20025 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 0 2 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>5292.00</div> BUS TRANSPORTATION

**SUBTOTAL** of Disbursements This Page (optional) .....

**5616.48**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)  
 Illinois Republican Party

<b>A.</b> Full Name (Last, First, Middle Initial) Pinnacle Direct, Inc.	<b>Transaction ID:</b> 81014.E20228 <b>Date of Disbursement</b>
Mailing Address 15260 113th St. North	<div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 1 5 / 2 0 0 8</div> </div>
City Stillwater State MN Zip Code 55082-9575	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Party Fundraising Mail Candidate Name	<div> <div>9771.88</div> <div>Category/Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	PARTY FUNDRAISING MAIL
<b>B.</b> Full Name (Last, First, Middle Initial) Pinnacle Direct, Inc.	<b>Transaction ID:</b> 81014.E20238 <b>Date of Disbursement</b>
Mailing Address 15260 113th St. North	<div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 1 8 / 2 0 0 8</div> </div>
City Stillwater State MN Zip Code 55082-9575	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Party Fundraising Mail Candidate Name	<div> <div>3112.60</div> <div>Category/Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	PARTY FUNDRAISING MAIL
<b>C.</b> Full Name (Last, First, Middle Initial) Pinnacle Direct, Inc.	<b>Transaction ID:</b> 81014.E20240 <b>Date of Disbursement</b>
Mailing Address 15260 113th St. North	<div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 2 4 / 2 0 0 8</div> </div>
City Stillwater State MN Zip Code 55082-9575	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Party Fundraising Mail Candidate Name	<div> <div>387.63</div> <div>Category/Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	PARTY FUNDRAISING MAIL

**SUBTOTAL** of Disbursements This Page (optional) .....

**13272.11**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)  
Illinois Republican Party

**A.**

Full Name (Last, First, Middle Initial)  
SBDM

Mailing Address P.O. Box 706

City Tallahassee State FL Zip Code 32302-

Purpose of Disbursement  
Party Fundraising Mail

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 81014.E20227

Date of Disbursement

09 / 15 / 2008

Amount of Each Disbursement this Period

1696.20

PARTY FUNDRAISING MAIL

**B.**

Full Name (Last, First, Middle Initial)  
U.S. Postmaster

Mailing Address Station E  
100 W. Randolph Street

City Chicago State IL Zip Code 60601-

Purpose of Disbursement  
Party Fundraising Postage

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 81010.E20082

Date of Disbursement

09 / 19 / 2008

Amount of Each Disbursement this Period

1000.00

PARTY FUNDRAISING POSTAGE

**C.**

Full Name (Last, First, Middle Initial)  
Amanda Wears

Mailing Address 2030 W Irving Park Rd

City Chicago State IL Zip Code 60618-3910

Purpose of Disbursement  
REIMBURSEMENT: TRAIN & CAB FARES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 81010.E20166

Date of Disbursement

09 / 30 / 2008

Amount of Each Disbursement this Period

34.50

REIMBURSEMENT: TRAIN & CAB  
FARES

**SUBTOTAL** of Disbursements This Page (optional) .....

2730.70

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 73 / 128

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

Illinois Republican Party

A.

Full Name (Last, First, Middle Initial)

Republicans of Wheeling Township

Mailing Address P.O. Box 1996

City  
Arlington Heights

State  
IL

Zip Code  
60006-

Purpose of Disbursement  
Rent

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State:

District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 81014.E20272

Date of Disbursement

/   /

Amount of Each Disbursement this Period

239.58

RENT

SUBTOTAL of Disbursements This Page (optional) .....

239.58

TOTAL This Period (last page this line number only) .....

25615.28

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 74 / 128

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Illinois Republican Party

A.

Full Name (Last, First, Middle Initial)

Craig Duchossois

Mailing Address 1532 Butterfield Rd.

City  
Flossmoor

State  
IL

Zip Code  
60422-

Purpose of Disbursement  
Refund of Contribution

Candidate Name

010

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State:

District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 81010.E20052

Date of Disbursement

/   /

Amount of Each Disbursement this Period

10000.00

SUBTOTAL of Disbursements This Page (optional) .....

10000.00

TOTAL This Period (last page this line number only) .....

10000.00

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Illinois Republican Party

<b>A.</b> Full Name (Last, First, Middle Initial) Arena Communications	<b>Transaction ID:</b> 81010.E20083 <b>Date of Disbursement</b>																				
Mailing Address 515 S. 700 East, Ste. 2C	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>1</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		1	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	9		1	1		2	0	0	8												
City Salt Lake City State UT Zip Code 84102-	Amount of Each Disbursement this Period																				
Purpose of Disbursement FEA: VOLUNTEER MAIL - ROSKAM	<table border="1"> <tr> <td>9</td><td>4</td><td>2</td><td>2</td><td>0</td><td>0</td> </tr> </table>	9	4	2	2	0	0														
9	4	2	2	0	0																
Candidate Name PETER ROSKAM	Category/ Type																				
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 06	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ FEA: VOLUNTEER MAIL - ROS-KAM																				
<b>B.</b> Full Name (Last, First, Middle Initial) Arena Communications	<b>Transaction ID:</b> 81010.E20084 <b>Date of Disbursement</b>																				
Mailing Address 515 S. 700 East, Ste. 2C	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>1</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		1	2		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	9		1	2		2	0	0	8												
City Salt Lake City State UT Zip Code 84102-	Amount of Each Disbursement this Period																				
Purpose of Disbursement FEA: VOLUNTEER MAIL - ROSKAM	<table border="1"> <tr> <td>9</td><td>4</td><td>2</td><td>2</td><td>0</td><td>0</td> </tr> </table>	9	4	2	2	0	0														
9	4	2	2	0	0																
Candidate Name PETER ROSKAM	Category/ Type																				
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 06	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ FEA: VOLUNTEER MAIL - ROS-KAM																				
<b>C.</b> Full Name (Last, First, Middle Initial) Arena Communications	<b>Transaction ID:</b> 81010.E20085 <b>Date of Disbursement</b>																				
Mailing Address 515 S. 700 East, Ste. 2C	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>1</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		1	6		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	9		1	6		2	0	0	8												
City Salt Lake City State UT Zip Code 84102-	Amount of Each Disbursement this Period																				
Purpose of Disbursement FEA: VOLUNTEER MAIL - ROSKAM	<table border="1"> <tr> <td>9</td><td>4</td><td>2</td><td>2</td><td>0</td><td>0</td> </tr> </table>	9	4	2	2	0	0														
9	4	2	2	0	0																
Candidate Name PETER ROSKAM	Category/ Type																				
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 06	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ FEA: VOLUNTEER MAIL - ROS-KAM																				

**SUBTOTAL** of Disbursements This Page (optional) .....

**28266.00**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Illinois Republican Party

<b>A.</b> Full Name (Last, First, Middle Initial) Arena Communications	<b>Transaction ID:</b> 81010.E20086 <b>Date of Disbursement</b>																				
Mailing Address 515 S. 700 East, Ste. 2C	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>1</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		1	8		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	9		1	8		2	0	0	8												
City Salt Lake City State UT Zip Code 84102-	Amount of Each Disbursement this Period																				
Purpose of Disbursement FEA: VOLUNTEER MAIL - ROSKAM	<table border="1"> <tr> <td>9</td><td>4</td><td>4</td><td>7</td><td>0</td><td>0</td> </tr> </table>	9	4	4	7	0	0														
9	4	4	7	0	0																
Candidate Name PETER ROSKAM	Category/ Type																				
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 06	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ FEA: VOLUNTEER MAIL - ROS-KAM																				
<b>B.</b> Full Name (Last, First, Middle Initial) Arena Communications	<b>Transaction ID:</b> 81010.E20087 <b>Date of Disbursement</b>																				
Mailing Address 515 S. 700 East, Ste. 2C	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>1</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		1	9		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	9		1	9		2	0	0	8												
City Salt Lake City State UT Zip Code 84102-	Amount of Each Disbursement this Period																				
Purpose of Disbursement FEA: VOLUNTEER MAIL - ROSKAM	<table border="1"> <tr> <td>9</td><td>4</td><td>4</td><td>7</td><td>0</td><td>0</td> </tr> </table>	9	4	4	7	0	0														
9	4	4	7	0	0																
Candidate Name PETER ROSKAM	Category/ Type																				
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 06	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ FEA: VOLUNTEER MAIL - ROS-KAM																				
<b>C.</b> Full Name (Last, First, Middle Initial) Arena Communications	<b>Transaction ID:</b> 81010.E20088 <b>Date of Disbursement</b>																				
Mailing Address 515 S. 700 East, Ste. 2C	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>2</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		2	6		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	9		2	6		2	0	0	8												
City Salt Lake City State UT Zip Code 84102-	Amount of Each Disbursement this Period																				
Purpose of Disbursement FEA: VOLUNTEER MAIL - ROSKAM	<table border="1"> <tr> <td>8</td><td>2</td><td>2</td><td>3</td><td>0</td><td>0</td> </tr> </table>	8	2	2	3	0	0														
8	2	2	3	0	0																
Candidate Name PETER ROSKAM	Category/ Type																				
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 06	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ FEA: VOLUNTEER MAIL - ROS-KAM																				

**SUBTOTAL** of Disbursements This Page (optional) .....

**27117.00**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 77 / 128

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Illinois Republican Party

**A.**

Full Name (Last, First, Middle Initial)  
Curt Conrad

Mailing Address 2704 Cronin Dr

City Springfield State IL Zip Code 62711-7083

Purpose of Disbursement  
FEA: PAYROLL

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 81010.E20063

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2185.19

FEA: PAYROLL

**B.**

Full Name (Last, First, Middle Initial)  
Curt Conrad

Mailing Address 2704 Cronin Dr

City Springfield State IL Zip Code 62711-7083

Purpose of Disbursement  
FEA: PAYROLL

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 81010.E20064

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2185.19

FEA: PAYROLL

**C.**

Full Name (Last, First, Middle Initial)  
Priscilla R. DePree

Mailing Address 1945 N Sheffield Ave Apt 203

City Chicago State IL Zip Code 60614-5551

Purpose of Disbursement  
FEA: PAYROLL

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 81010.E20102

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2193.84

FEA: PAYROLL

**SUBTOTAL** of Disbursements This Page (optional) .....

6564.22

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 78 / 128

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Illinois Republican Party

<b>A.</b> Full Name (Last, First, Middle Initial) Priscilla R. DePree	<b>Transaction ID:</b> 81010.E20103 <b>Date of Disbursement</b>																				
Mailing Address 1945 N Sheffield Ave Apt 203	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		3	0		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	9		3	0		2	0	0	8												
City Chicago State IL Zip Code 60614-5551	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement FEA: PAYROLL	<table border="1"> <tr> <td colspan="10">2193.84</td> </tr> </table>	2193.84																			
2193.84																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ FEA: PAYROLL																				
<b>B.</b> Full Name (Last, First, Middle Initial) Steve Ettinger	<b>Transaction ID:</b> 81010.E20117 <b>Date of Disbursement</b>																				
Mailing Address 1221 Larchmont Dr	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		1	5		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	9		1	5		2	0	0	8												
City Springfield State IL Zip Code 62704-2109	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement FEA: PAYROLL	<table border="1"> <tr> <td colspan="10">986.37</td> </tr> </table>	986.37																			
986.37																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ FEA: PAYROLL																				
<b>C.</b> Full Name (Last, First, Middle Initial) Steve Ettinger	<b>Transaction ID:</b> 81010.E20118 <b>Date of Disbursement</b>																				
Mailing Address 1221 Larchmont Dr	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		3	0		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	9		3	0		2	0	0	8												
City Springfield State IL Zip Code 62704-2109	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement FEA: PAYROLL	<table border="1"> <tr> <td colspan="10">986.37</td> </tr> </table>	986.37																			
986.37																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ FEA: PAYROLL																				

**SUBTOTAL** of Disbursements This Page (optional) .....

**4166.58**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Illinois Republican Party

**A.**

Full Name (Last, First, Middle Initial)  
The Guardian

Mailing Address P.O. Box 8012

City Appleton State WI Zip Code 54913-8012

Purpose of Disbursement  
FEA Health Insurance

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 81010.E20054

Date of Disbursement

/   /

Amount of Each Disbursement this Period

6143.33

FEA HEALTH INSURANCE

**B.**

Full Name (Last, First, Middle Initial)  
Jason Heffley

Mailing Address 3449 N Racine Ave # 1

City Chicago State IL Zip Code 60657-1536

Purpose of Disbursement  
FEA: PAYROLL

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 81010.E20131

Date of Disbursement

/   /

Amount of Each Disbursement this Period

3676.00

FEA: PAYROLL

**C.**

Full Name (Last, First, Middle Initial)  
Jason Heffley

Mailing Address 3449 N Racine Ave # 1

City Chicago State IL Zip Code 60657-1536

Purpose of Disbursement  
FEA: PAYROLL

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 81010.E20132

Date of Disbursement

/   /

Amount of Each Disbursement this Period

3676.00

FEA: PAYROLL

**SUBTOTAL** of Disbursements This Page (optional) .....

13495.33

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Illinois Republican Party

**A.**

Full Name (Last, First, Middle Initial)  
Illinois Department of Revenue

Mailing Address P.O. Box 88294

City Chicago State IL Zip Code 60680-

Purpose of Disbursement  
FEA: PAYROLL TAXES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 81010.E20204

Date of Disbursement

/   /

Amount of Each Disbursement this Period

622.13

FEA: PAYROLL TAXES

**B.**

Full Name (Last, First, Middle Initial)  
Illinois Department of Revenue

Mailing Address P.O. Box 88294

City Chicago State IL Zip Code 60680-

Purpose of Disbursement  
FEA: PAYROLL TAXES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 81010.E20206

Date of Disbursement

/   /

Amount of Each Disbursement this Period

681.63

FEA: PAYROLL TAXES

**C.**

Full Name (Last, First, Middle Initial)  
Internal Revenue Service

Mailing Address P.O. Box 970010

City Saint Louis State MO Zip Code 63197-0010

Purpose of Disbursement  
FEA: PAYROLL TAXES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 81010.E20031

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2999.64

FEA: PAYROLL TAXES

**SUBTOTAL** of Disbursements This Page (optional) .....

4303.40

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 81 / 128

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Illinois Republican Party

<b>A.</b> Full Name (Last, First, Middle Initial) Internal Revenue Service Mailing Address P.O. Box 970010	<b>Transaction ID:</b> 81014.E20234 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 1 8 / 2 0 0 8</div> </div>
City Saint Louis State MO Zip Code 63197-0010 Purpose of Disbursement FEA: PAYROLL TAXES Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Amount of Each Disbursement this Period</b> <div>6553.12</div> <b>FEA: PAYROLL TAXES</b>
<b>B.</b> Full Name (Last, First, Middle Initial) Korzenowski Design Mailing Address 266 West Lake Street City Elmhurst State IL Zip Code 60126- Purpose of Disbursement FEA: VOLUNTEER MAIL - KIRK Candidate Name MARK STEVEN KIRK Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: IL District: 10	<b>Transaction ID:</b> 81010.E20089 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 1 1 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>22285.00</div> <b>FEA: VOLUNTEER MAIL - KIRK</b>
<b>C.</b> Full Name (Last, First, Middle Initial) Lance Trover Mailing Address 616 N 5th St City Vienna State IL Zip Code 62995-1633 Purpose of Disbursement FEA: PAYROLL Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> 81010.E20145 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 1 5 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>2018.62</div> <b>FEA: PAYROLL</b>

**SUBTOTAL** of Disbursements This Page (optional) .....

**30856.74**

**TOTAL** This Period (last page this line number only) .....

	21b		22		23		24		25		26
	27		28a		28b		28c		29		x 30b

NAME OF COMMITTEE (In Full)  
Illinois Republican Party

Full Name (Last, First, Middle Initial)  
Lance Trover

09 / 30 / 2008

2018.62

FEA: PAYROLL

Full Name (Last, First, Middle Initial)  
U.S. Postmaster

MM / DD / YYYY

12720.39

FEA: VOLUNTEER MAIL - KIRK

Full Name (Last, First, Middle Initial)  
U.S. Postmaster

20971.00

FEA: VOLUNTEER MAIL - ROS-KAM

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Illinois Republican Party

<b>A.</b> Full Name (Last, First, Middle Initial) U.S. Postmaster	<b>Transaction ID:</b> 81010.E20078 <b>Date of Disbursement</b>																				
Mailing Address 2105 E. Cook St.	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>1</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		1	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	9		1	1		2	0	0	8												
City Springfield State IL Zip Code 62703-9998	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement FEA: VOLUNTEER MAIL - ROSKAM	<table border="1"> <tr> <td>8</td><td>2</td><td>7</td><td>0</td><td>.</td><td>0</td><td>0</td> </tr> </table>	8	2	7	0	.	0	0													
8	2	7	0	.	0	0															
Candidate Name PETER ROSKAM	Category/ Type																				
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 06	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ <b>FEA: VOLUNTEER MAIL - ROS-KAM</b>																				
<b>B.</b> Full Name (Last, First, Middle Initial) U.S. Postmaster	<b>Transaction ID:</b> 81010.E20080 <b>Date of Disbursement</b>																				
Mailing Address 2105 E. Cook St.	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>1</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		1	9		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	9		1	9		2	0	0	8												
City Springfield State IL Zip Code 62703-9998	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement FEA: VOLUNTEER MAIL - ROSKAM	<table border="1"> <tr> <td>1</td><td>6</td><td>0</td><td>6</td><td>.</td><td>4</td><td>0</td> </tr> </table>	1	6	0	6	.	4	0													
1	6	0	6	.	4	0															
Candidate Name PETER ROSKAM	Category/ Type																				
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 06	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ <b>FEA: VOLUNTEER MAIL - ROS-KAM</b>																				
<b>C.</b> Full Name (Last, First, Middle Initial) U.S. Postmaster	<b>Transaction ID:</b> 81010.E20081 <b>Date of Disbursement</b>																				
Mailing Address 2105 E. Cook St.	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>2</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		2	2		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	9		2	2		2	0	0	8												
City Springfield State IL Zip Code 62703-9998	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement FEA: VOLUNTEER MAIL - ROSKAM	<table border="1"> <tr> <td>1</td><td>8</td><td>4</td><td>5</td><td>.</td><td>0</td><td>0</td> </tr> </table>	1	8	4	5	.	0	0													
1	8	4	5	.	0	0															
Candidate Name PETER ROSKAM	Category/ Type																				
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 06	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ <b>FEA: VOLUNTEER MAIL - ROS-KAM</b>																				

**SUBTOTAL** of Disbursements This Page (optional) .....

**26179.40**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)  
 Illinois Republican Party

<b>A.</b> Full Name (Last, First, Middle Initial) Amanda Wears	<b>Transaction ID:</b> 81010.E20158 <b>Date of Disbursement</b>
Mailing Address 2030 W Irving Park Rd	<div> <div><small>M</small> <small>M</small> / <small>D</small> <small>D</small> / <small>Y</small> <small>Y</small> <small>Y</small> <small>Y</small></div> <div>09 / 30 / 2008</div> </div>
City Chicago State IL Zip Code 60618-3910	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement FEA: PAYROLL Candidate Name	<div>1506.07</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type  FEA: PAYROLL
<b>B.</b> Full Name (Last, First, Middle Initial) Joe Weiss	<b>Transaction ID:</b> 81010.E20170 <b>Date of Disbursement</b>
Mailing Address 1683 Constitution Dr	<div> <div><small>M</small> <small>M</small> / <small>D</small> <small>D</small> / <small>Y</small> <small>Y</small> <small>Y</small> <small>Y</small></div> <div>09 / 15 / 2008</div> </div>
City Glenview State IL Zip Code 60026-7705	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement FEA: PAYROLL Candidate Name	<div>1656.02</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type  FEA: PAYROLL
<b>C.</b> Full Name (Last, First, Middle Initial) Joe Weiss	<b>Transaction ID:</b> 81010.E20178 <b>Date of Disbursement</b>
Mailing Address 1683 Constitution Dr	<div> <div><small>M</small> <small>M</small> / <small>D</small> <small>D</small> / <small>Y</small> <small>Y</small> <small>Y</small> <small>Y</small></div> <div>09 / 15 / 2008</div> </div>
City Glenview State IL Zip Code 60026-7705	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement REIMBURSEMENT: VOTER LIST Candidate Name	<div>35.00</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type  REIMBURSEMENT: VOTER LIST

**SUBTOTAL** of Disbursements This Page (optional) .....

3197.09

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 85 / 128

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Illinois Republican Party

<b>A.</b> Full Name (Last, First, Middle Initial) Joe Weiss	<b>Transaction ID:</b> 81010.E20171 <b>Date of Disbursement</b>																				
Mailing Address 1683 Constitution Dr	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		3	0		2	0	0	8
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0	9		3	0		2	0	0	8												
City State Zip Code Glenview IL 60026-7705	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement FEA: PAYROLL	<table border="1"> <tr> <td colspan="10">1656.02</td> </tr> </table>	1656.02																			
1656.02																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ <b>FEA: PAYROLL</b>																				
<b>B.</b> Full Name (Last, First, Middle Initial) Mike Zolnierowicz	<b>Transaction ID:</b> 81010.E20185 <b>Date of Disbursement</b>																				
Mailing Address 3648 Venard Rd	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		1	5		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	9		1	5		2	0	0	8												
City State Zip Code Downers Grove IL 60515-1349	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement FEA: PAYROLL	<table border="1"> <tr> <td colspan="10">2701.76</td> </tr> </table>	2701.76																			
2701.76																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ <b>FEA: PAYROLL</b>																				
<b>C.</b> Full Name (Last, First, Middle Initial) Mike Zolnierowicz	<b>Transaction ID:</b> 81010.E20184 <b>Date of Disbursement</b>																				
Mailing Address 3648 Venard Rd	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		3	0		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	9		3	0		2	0	0	8												
City State Zip Code Downers Grove IL 60515-1349	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement FEA: PAYROLL	<table border="1"> <tr> <td colspan="10">2701.76</td> </tr> </table>	2701.76																			
2701.76																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ <b>FEA: PAYROLL</b>																				

**SUBTOTAL** of Disbursements This Page (optional) .....

**7059.54**

**TOTAL** This Period (last page this line number only) .....

**186915.31**

**SCHEDULE H3 (FEC Form 3X)**  
**TRANSFERS FROM NONFEDERAL ACCOUNTS FOR**  
**ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

PAGE 86 / 128  
 FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)

Illinois Republican Party

NAME OF ACCOUNT

IL Republican Party  
Northern Trust No

DATE OF RECEIPT

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	9		2	0	0	8

TOTAL AMOUNT TRANSFERRED

119410.18

## BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative .....

119410.18

Transaction ID: H381014.C294179

ii) Generic Voter Drive .....

Transaction ID:

iii) Exempt Activities .....

Transaction ID:

iv) Direct Fundraising (List Activity or Event Identifier)

a) .....

Transaction ID:

b) .....

Transaction ID:

c) Total Amount Transferred for Direct Fundraising .....

v) Direct Candidate Support (List of Activity or Event Identifier)

a) .....

Transaction ID:

b) .....

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support .....

vi) Public Communications Referring Only to Party (Made by PAC)

Transaction ID:

## TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative) .....

119410.18

TOTAL This Period (Generic Voter Drive) .....

0.00

TOTAL This Period (Exempt Activities) .....

0.00

TOTAL This Period (Direct Fundraising) .....

0.00

TOTAL This Period (Direct Candidate Support) .....

0.00

TOTAL This Period (Public Communications Referring Only to Party) .....

0.00

TOTAL This Period (Total Amount Transferred) .....

119410.18

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 87 / 128

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Illinois Republican Party

**A. Full Name (Last, First, Middle Initial)**  
 Millennium Hotel Minneapolis

Mailing Address

1313 Nicollet Ave

City	State	Zip Code
Minneapolis	MN	55403-2630

Purpose of Disbursement:  
Hotel RoomsCategory/  
TypeActivity or Event Identifier:  
ADMINISTRATION B 21

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

845584.86

Date 

M	M
0	9

 / 

D	D
3	0

 / 

Y	Y	Y	Y
2	0	0	8

Transaction ID: H481010.E20009

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

219.95

391.01

610.96

**B. Full Name (Last, First, Middle Initial)**  
 Millennium Hotel Minneapolis

Mailing Address

1313 Nicollet Ave

City	State	Zip Code
Minneapolis	MN	55403-2630

Purpose of Disbursement:  
AV Equipment Rental RefundCategory/  
TypeActivity or Event Identifier:  
ADMINISTRATION B 21

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

844635.73

Date 

M	M
0	9

 / 

D	D
3	0

 / 

Y	Y	Y	Y
2	0	0	8

Transaction ID: H481010.E20011

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

-341.69

-607.44

-949.13

**C. Full Name (Last, First, Middle Initial)**  
 West Bend Mutual Insurance

Mailing Address

188 Industrial Dr., Ste. 430

City	State	Zip Code
Elmhurst	IL	60126-

Purpose of Disbursement:  
Non-FEA Insurance ReimbursementCategory/  
TypeActivity or Event Identifier:  
ADMINISTRATION B 21

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

843151.85

Date 

M	M
0	9

 / 

D	D
3	0

 / 

Y	Y	Y	Y
2	0	0	8

Transaction ID: H481010.E20012

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

-753.12

-1338.88

-2092.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

-874.86

-1555.31

-2430.17

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 88 / 128  
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Illinois Republican Party

**A. Full Name (Last, First, Middle Initial)**  
205 Randolph Investors, LLC

Mailing Address

205 W. Randolph

City	State	Zip Code
Chicago	IL	60606-

 Purpose of Disbursement:  
Rent
Category/  
Type
 Activity or Event Identifier:  
ADMINISTRATION B 21

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

797841.36

 Date 

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	0	1	/	2	0	0	8

Transaction ID: H481010.E20013

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1464.34		2603.26		4067.60

**B. Full Name (Last, First, Middle Initial)**  
Vista Realty, Inc.

Mailing Address

220 W. Carpenter St.

City	State	Zip Code
Springfield	IL	62702-

 Purpose of Disbursement:  
Rent
Category/  
Type
 Activity or Event Identifier:  
ADMINISTRATION B 21

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

793773.76

 Date 

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	0	1	/	2	0	0	8

Transaction ID: H481010.E20017

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
504.00		896.00		1400.00

**C. Full Name (Last, First, Middle Initial)**  
Patton Boggs, LLP

Mailing Address

2550 M St NW

City	State	Zip Code
Washington	DC	20037-1301

 Purpose of Disbursement:  
Consulting: Legal
Category/  
Type
 Activity or Event Identifier:  
ADMINISTRATION B 21

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

801341.36

 Date 

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	0	1	/	2	0	0	8

Transaction ID: H481010.E20021

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1260.00		2240.00		3500.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3228.34		5739.26		8967.60

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT



# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 89 / 128

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Illinois Republican Party

**A. Full Name (Last, First, Middle Initial)**  
 Internal Revenue Service

Mailing Address

P.O. Box 970010

City

State

Zip Code

Saint Louis

MO

63197-0010

Purpose of Disbursement:  
 Non-FEA Payroll Taxes

Category/  
Type

Activity or Event Identifier:  
 ADMINISTRATION B 21

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt

☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

808411.42

Date  M  M /  D  D /  Y  Y  Y  Y  
 09 / 04 / 2008

Transaction ID: H481010.E20032

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

1743.33

3099.24

4842.57

**B. Full Name (Last, First, Middle Initial)**  
 Deluxe Business Forms

Mailing Address

&amp; Supplies

P.O. Box 64500

City

State

Zip Code

Saint Paul

MN

55164-0500

Purpose of Disbursement:  
 Office Supplies

Category/  
Type

Activity or Event Identifier:  
 ADMINISTRATION B 21

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt

☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

808538.23

Date  M  M /  D  D /  Y  Y  Y  Y  
 09 / 05 / 2008

Transaction ID: H481010.E20033

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

45.65

81.16

126.81

**C. Full Name (Last, First, Middle Initial)**  
 Public Storage

Mailing Address

2400 Palmer Drive

City

State

Zip Code

Schaumburg

IL

60173-

Purpose of Disbursement:  
 Storage

Category/  
Type

Activity or Event Identifier:  
 ADMINISTRATION B 21

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt

☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

809416.42

Date  M  M /  D  D /  Y  Y  Y  Y  
 09 / 12 / 2008

Transaction ID: H481010.E20034

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

72.00

128.00

200.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

1860.98

3308.40

5169.38

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 90 / 128

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Illinois Republican Party

**A. Full Name (Last, First, Middle Initial)**  
Ameren Cilco

Mailing Address

P.O. Box 66826

City	State	Zip Code
Saint Louis	MO	63166-

Purpose of Disbursement:  
UtilitiesCategory/  
TypeActivity or Event Identifier:  
ADMINISTRATION B 21

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

809216.42

Date 

M	M
0	9

 / 

D	D
1	2

 / 

Y	Y	Y	Y
2	0	0	8

Transaction ID: H481010.E20035

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

25.07

44.56

69.63

**B. Full Name (Last, First, Middle Initial)**  
CDW Direct, LLC

Mailing Address

PO Box 75723

City	State	Zip Code
Chicago	IL	60675-5723

Purpose of Disbursement:  
Office EquipmentCategory/  
TypeActivity or Event Identifier:  
ADMINISTRATION B 21

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

808631.02

Date 

M	M
0	9

 / 

D	D
1	2

 / 

Y	Y	Y	Y
2	0	0	8

Transaction ID: H481010.E20036

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

33.40

59.39

92.79

**C. Full Name (Last, First, Middle Initial)**  
Kayleen Carlson

Mailing Address

26304 N Middleton Pkwy

City	State	Zip Code
Mundelein	IL	60060-9126

Purpose of Disbursement:  
Non-FEA PayrollCategory/  
TypeActivity or Event Identifier:  
ADMINISTRATION B 21

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

833758.65

Date 

M	M
0	9

 / 

D	D
1	5

 / 

Y	Y	Y	Y
2	0	0	8

Transaction ID: H481010.E20038

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

332.71

591.49

924.20

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

391.18

695.44

1086.62

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 91 / 128

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Illinois Republican Party

**A. Full Name (Last, First, Middle Initial)**

Kayleen Carlson

Mailing Address

26304 N Middleton Pkwy

City

State

Zip Code

Mundelein

IL

60060-9126

Purpose of Disbursement:

Non-FEA Payroll

Category/  
Type

Activity or Event Identifier:

ADMINISTRATION B 21

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

844305.02

Date 09 / 30 / 2008

Transaction ID: H481010.E20039

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

268.47

477.29

745.76

**B. Full Name (Last, First, Middle Initial)**

Nancy Mercado

Mailing Address

3059 W 38th St

City

State

Zip Code

Chicago

IL

60632-2315

Purpose of Disbursement:

Non-FEA Payroll

Category/  
Type

Activity or Event Identifier:

ADMINISTRATION B 21

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

810778.81

Date 09 / 15 / 2008

Transaction ID: H481010.E20040

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

341.55

607.20

948.75

**C. Full Name (Last, First, Middle Initial)**

Nancy Mercado

Mailing Address

3059 W 38th St

City

State

Zip Code

Chicago

IL

60632-2315

Purpose of Disbursement:

Non-FEA Payroll

Category/  
Type

Activity or Event Identifier:

ADMINISTRATION B 21

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

841821.92

Date 09 / 30 / 2008

Transaction ID: H481010.E20041

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

341.55

607.20

948.75

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

951.57

1691.69

2643.26

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 92 / 128

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Illinois Republican Party

**A. Full Name (Last, First, Middle Initial)**  
 VoiceText.com

Mailing Address

211 East 7th Street 12th Floor

City	State	Zip Code
Austin	TX	78701-

Purpose of Disbursement:  
 Telephone Service

Category/  
Type

Activity or Event Identifier:  
 ADMINISTRATION B 21

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

823785.62

Date 

M	M
0	9

 / 

D	D
1	5

 / 

Y	Y	Y	Y
2	0	0	8

Transaction ID: H481010.E20042

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

125.42

222.97

348.39

**B. Full Name (Last, First, Middle Initial)**  
 Lake Area Disposal Services

Mailing Address

2106 E. Cornell

City	State	Zip Code
Springfield	IL	62703-

Purpose of Disbursement:  
 Waste Disposal

Category/  
Type

Activity or Event Identifier:  
 ADMINISTRATION B 21

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

811330.93

Date 

M	M
0	9

 / 

D	D
1	5

 / 

Y	Y	Y	Y
2	0	0	8

Transaction ID: H481010.E20043

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

15.84

28.16

44.00

**C. Full Name (Last, First, Middle Initial)**  
 AT&T

Mailing Address

Bill Payment Center

City	State	Zip Code
Saginaw	MI	48663-

Purpose of Disbursement:  
 Telephone Service

Category/  
Type

Activity or Event Identifier:  
 ADMINISTRATION B 21

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

811888.28

Date 

M	M
0	9

 / 

D	D
1	5

 / 

Y	Y	Y	Y
2	0	0	8

Transaction ID: H481010.E20044

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

95.55

169.87

265.42

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

236.81

421.00

657.81

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 93 / 128

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Illinois Republican Party

**A. Full Name (Last, First, Middle Initial)**  
 Huckaby Davis Lisker

Mailing Address

228 South Washington Street Suite 115

City	State	Zip Code
Alexandria	VA	22314-

Purpose of Disbursement:  
 Cnsltng:Accounting&FEC Not Employee

Category/  
Type

Activity or Event Identifier:  
 ADMINISTRATION B 21

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support  
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

830992.59

Date 

M	M
0	9

 / 

D	D
1	5

 / 

Y	Y	Y	Y
2	0	0	8

Transaction ID: H481010.E20045

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

227.43

404.33

631.76

**B. Full Name (Last, First, Middle Initial)**  
 Neopost

Mailing Address

P.O. Box 73740

City	State	Zip Code
Chicago	IL	60673-

Purpose of Disbursement:  
 Generic Non-FEA Party Postage

Category/  
Type

Activity or Event Identifier:  
 ADMINISTRATION B 21

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support  
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

820230.43

Date 

M	M
0	9

 / 

D	D
1	5

 / 

Y	Y	Y	Y
2	0	0	8

Transaction ID: H481010.E20046

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

291.83

518.80

810.63

**C. Full Name (Last, First, Middle Initial)**  
 Flowers by Dave

Mailing Address

1103 N. Main St.

City	State	Zip Code
Benton	IL	62812-

Purpose of Disbursement:  
 Party Tent & Equip Rental Non-Candi

Category/  
Type

Activity or Event Identifier:  
 ADMINISTRATION B 21

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support  
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

819419.80

Date 

M	M
0	9

 / 

D	D
1	5

 / 

Y	Y	Y	Y
2	0	0	8

Transaction ID: H481010.E20047

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

220.35

391.72

612.07

## **SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

739.61

1314.85

2054.46

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 94 / 128

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Illinois Republican Party

**A. Full Name (Last, First, Middle Initial)**

The Stoneridge Group, LLC

## Mailing Address

554 West Main Street Building A, Suite 200

City State Zip Code

Buford GA 30518-

Purpose of Disbursement:  
Party Printing Non-CandidateCategory/  
TypeActivity or Event Identifier:  
ADMINISTRATION B 21

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

837199.81

Date 

M	M
0	9

 / 

D	D
1	5

 / 

Y	Y	Y	Y
2	0	0	8

Transaction ID: H481010.E20048

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

466.51

829.34

1295.85

**B. Full Name (Last, First, Middle Initial)**

Johnnys Restaurant

## Mailing Address

3115 Sangamon Avenue

City State Zip Code

Springfield IL 62702-

Purpose of Disbursement:  
Non-FEA Party CateringCategory/  
TypeActivity or Event Identifier:  
ADMINISTRATION B 21

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

834418.65

Date 

M	M
0	9

 / 

D	D
1	5

 / 

Y	Y	Y	Y
2	0	0	8

Transaction ID: H481010.E20049

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

237.60

422.40

660.00

**C. Full Name (Last, First, Middle Initial)**

MB Heating &amp; Cooling

## Mailing Address

1001 East Miller

City State Zip Code

Springfield IL 62702-

Purpose of Disbursement:  
UtilitiesCategory/  
TypeActivity or Event Identifier:  
ADMINISTRATION B 21

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

839091.10

Date 

M	M
0	9

 / 

D	D
1	5

 / 

Y	Y	Y	Y
2	0	0	8

Transaction ID: H481010.E20050

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

120.24

213.76

334.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

824.35

1465.50

2289.85

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Illinois Republican Party

**A. Full Name (Last, First, Middle Initial)**  
 Schirott & Luetkehans

Mailing Address

105 E Irving Park Road PO Box 247

City	State	Zip Code
Itasca	IL	60143-2117

Purpose of Disbursement:  
 Consulting: Legal

Category/  
Type

Activity or Event Identifier:  
 ADMINISTRATION B 21

Type of Allocated Activity:

- ☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support  
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

809830.06

Date 

M	M
0	9

 / 

D	D
1	5

 / 

Y	Y	Y	Y
2	0	0	8

Transaction ID: H481010.E20051

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

32.50

57.78

90.28

**B. Full Name (Last, First, Middle Initial)**  
 The Guardian

Mailing Address

P.O. Box 8012

City	State	Zip Code
Appleton	WI	54913-8012

Purpose of Disbursement:  
 Non-FEA Health Insurance

Category/  
Type

Activity or Event Identifier:  
 ADMINISTRATION B 21

Type of Allocated Activity:

- ☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support  
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

803568.85

Date 

M	M
0	9

 / 

D	D
0	2

 / 

Y	Y	Y	Y
2	0	0	8

Transaction ID: H481010.E20053

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

801.90

1425.59

2227.49

**C. Full Name (Last, First, Middle Initial)**  
 Barbara Pressman

Mailing Address

1240 N. Lake Shore Drive

City	State	Zip Code
Chicago	IL	60610-

Purpose of Disbursement:  
 Reimbursement: See Memos

Category/  
Type

Activity or Event Identifier:  
 ADMINISTRATION B 21

Type of Allocated Activity:

- ☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support  
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

809739.78

Date 

M	M
0	9

 / 

D	D
1	2

 / 

Y	Y	Y	Y
2	0	0	8

Transaction ID: H481010.E20057

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

116.41

206.95

323.36

## **SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

950.81

1690.32

2641.13

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 96 / 128

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Illinois Republican Party

**A. Full Name (Last, First, Middle Initial)**

Crowne Plaza Springfield

Mailing Address

3000 S. Dirksen Pkwy.

City

State

Zip Code

Springfield

IL

62703-

Purpose of Disbursement:

Meal Reimbursement

Category/  
Type

Activity or Event Identifier:

ADMINISTRATION B 21

**[MEMO ITEM]** Meal Reimbursement

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

54.35

Date

M M

/

D D

/

Y Y

/

Y Y

0 9

1 2

2 0

0 8

Transaction ID: H481010.E20058

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

19.57

34.78

54.35

**B. Full Name (Last, First, Middle Initial)**

Applebees

Mailing Address

550 Mamaroneck Ave

City

State

Zip Code

Harrison

NY

10528-

Purpose of Disbursement:

Meal Reimbursement

Category/  
Type

Activity or Event Identifier:

ADMINISTRATION B 21

**[MEMO ITEM]** Meal Reimbursement

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

55.66

Date

M M

/

D D

/

Y Y

/

Y Y

0 9

1 2

2 0

0 8

Transaction ID: H481010.E20091

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

20.04

35.62

55.66

**C. Full Name (Last, First, Middle Initial)**

Interpark

Mailing Address

55 E. Monroe

City

State

Zip Code

Chicago

IL

60603-

Purpose of Disbursement:

Parking Reimbursement

Category/  
Type

Activity or Event Identifier:

ADMINISTRATION B 21

**[MEMO ITEM]** Parking Reimbursement

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

14.00

Date

M M

/

D D

/

Y Y

/

Y Y

0 9

1 2

2 0

0 8

Transaction ID: H481010.E20093

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

5.04

8.96

14.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

0.00

0.00

0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT



# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Illinois Republican Party

**A. Full Name (Last, First, Middle Initial)**  
 Circle K Midwest

Mailing Address

PO Box 347

City State Zip Code  
 Columbus IN 47201-

Purpose of Disbursement:  
 Gas Reimbursement

Category/  
Type

Activity or Event Identifier:  
 ADMINISTRATION B 21

**[MEMO ITEM]** Gas Reimbursement

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

120.02

Date  M  M /  D  D /  Y  Y  Y  Y

Transaction ID: H481010.E20092

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

43.21

76.81

120.02

**B. Full Name (Last, First, Middle Initial)**  
 Outback Steakhouse

Mailing Address

3201 Horizon Drive

City State Zip Code  
 Springfield IL 62703-

Purpose of Disbursement:  
 Meal Reimbursement

Category/  
Type

Activity or Event Identifier:  
 ADMINISTRATION B 21

**[MEMO ITEM]** Meal Reimbursement

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

79.33

Date  M  M /  D  D /  Y  Y  Y  Y

Transaction ID: H481010.E20094

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

28.56

50.77

79.33

**C. Full Name (Last, First, Middle Initial)**  
 Jeffrey Jurgens

Mailing Address

140 S. Dearborn St, 6th Fl

City State Zip Code  
 Chicago IL 60603-

Purpose of Disbursement:  
 Mileage Reimbursement

Category/  
Type

Activity or Event Identifier:  
 ADMINISTRATION B 21

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

808867.36

Date  M  M /  D  D /  Y  Y  Y  Y

Transaction ID: H481010.E20059

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

85.08

151.26

236.34

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

85.08

151.26

236.34

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 98 / 128

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Illinois Republican Party

**A. Full Name (Last, First, Middle Initial)**  
 FedEx Kinkos

Mailing Address

3 Galleria Tower

City	State	Zip Code
Dallas	TX	75267-

Purpose of Disbursement:  
 Party Printing Non-Candidate

Category/  
Type

Activity or Event Identifier:  
 ADMINISTRATION B 21

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

809146.79

Date 

M	M
0	9

 / 

D	D
1	2

 / 

Y	Y	Y	Y
2	0	0	8

Transaction ID: H481010.E20060

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

100.59

178.84

279.43

**B. Full Name (Last, First, Middle Initial)**  
 Curt Conrad

Mailing Address

2704 Cronin Dr

City	State	Zip Code
Springfield	IL	62711-7083

Purpose of Disbursement:  
 Mileage Reimbursement Correction

Category/  
Type

Activity or Event Identifier:  
 ADMINISTRATION B 21

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

833604.34

Date 

M	M
0	9

 / 

D	D
1	5

 / 

Y	Y	Y	Y
2	0	0	8

Transaction ID: H481010.E20070

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

-293.15

-521.16

-814.31

**C. Full Name (Last, First, Middle Initial)**  
 Curt Conrad

Mailing Address

2704 Cronin Dr

City	State	Zip Code
Springfield	IL	62711-7083

Purpose of Disbursement:  
 Reimbursement: See Memos

Category/  
Type

Activity or Event Identifier:  
 ADMINISTRATION B 21

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

834554.04

Date 

M	M
0	9

 / 

D	D
1	5

 / 

Y	Y	Y	Y
2	0	0	8

Transaction ID: H481010.E20071

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

341.89

607.81

949.70

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

149.33

265.49

414.82

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 99 / 128

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Illinois Republican Party

**A. Full Name (Last, First, Middle Initial)**  
 Curt Conrad

Mailing Address  
 2704 Cronin Dr

City State Zip Code  
 Springfield IL 62711-7083

Purpose of Disbursement:  
 Reimbursement: See Memos

Category/Type

Activity or Event Identifier:  
 ADMINISTRATION B 21

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support  
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

844717.08

Date M M / D D / Y Y Y Y  
 0 9 / 3 0 / 2 0 0 8

Transaction ID: H481010.E20072

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

148.34

263.72

412.06

**B. Full Name (Last, First, Middle Initial)**  
 Priscilla R. DePree

Mailing Address  
 1945 N Sheffield Ave Apt 203

City State Zip Code  
 Chicago IL 60614-5551

Purpose of Disbursement:  
 Reimbursement: See Memos

Category/Type

Activity or Event Identifier:  
 ADMINISTRATION B 21

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support  
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

831168.23

Date M M / D D / Y Y Y Y  
 0 9 / 1 5 / 2 0 0 8

Transaction ID: H481010.E20109

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

63.23

112.41

175.64

**C. Full Name (Last, First, Middle Initial)**  
 Priscilla R. DePree

Mailing Address  
 1945 N Sheffield Ave Apt 203

City State Zip Code  
 Chicago IL 60614-5551

Purpose of Disbursement:  
 Reimbursement: See Memos

Category/Type

Activity or Event Identifier:  
 ADMINISTRATION B 21

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support  
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

843194.85

Date M M / D D / Y Y Y Y  
 0 9 / 3 0 / 2 0 0 8

Transaction ID: H481010.E20111

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

15.48

27.52

43.00

## **SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

227.05

403.65

630.70

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 100 / 128  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Illinois Republican Party

**A. Full Name (Last, First, Middle Initial)**

Steve Ettinger

Mailing Address

1221 Larchmont Dr

City

State

Zip Code

Springfield

IL

62704-2109

Purpose of Disbursement:

Reimbursement: See Memos

Category/  
Type

Activity or Event Identifier:

ADMINISTRATION B 21

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

835668.79

Date 09 / 15 / 2008

Transaction ID: H481010.E20124

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

114.98

204.41

319.39

**B. Full Name (Last, First, Middle Initial)**

Steve Ettinger

Mailing Address

1221 Larchmont Dr

City

State

Zip Code

Springfield

IL

62704-2109

Purpose of Disbursement:

Mileage Reimbursement

Category/  
Type

Activity or Event Identifier:

ADMINISTRATION B 21

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

835903.96

Date 09 / 15 / 2008

Transaction ID: H481010.E20125

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

84.66

150.51

235.17

**C. Full Name (Last, First, Middle Initial)**

Steve Ettinger

Mailing Address

1221 Larchmont Dr

City

State

Zip Code

Springfield

IL

62704-2109

Purpose of Disbursement:

Reimbursement: See Memos

Category/  
Type

Activity or Event Identifier:

ADMINISTRATION B 21

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

844904.28

Date 09 / 30 / 2008

Transaction ID: H481010.E20126

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

67.39

119.81

187.20

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

267.03

474.73

741.76

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 101 / 128  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Illinois Republican Party

**A. Full Name (Last, First, Middle Initial)**

Steve Ettinger

Mailing Address

1221 Larchmont Dr

City

State

Zip Code

Springfield

IL

62704-2109

Purpose of Disbursement:  
Mileage ReimbursementCategory/  
TypeActivity or Event Identifier:  
ADMINISTRATION B 21

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

844973.90

Date 09 / 30 / 2008

Transaction ID: H481010.E20127

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

25.06

44.56

69.62

**B. Full Name (Last, First, Middle Initial)**

Jason Heffley

Mailing Address

3449 N Racine Ave # 1

City

State

Zip Code

Chicago

IL

60657-1536

Purpose of Disbursement:  
Mileage ReimbursementCategory/  
TypeActivity or Event Identifier:  
ADMINISTRATION B 21

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

844942.44

Date 09 / 30 / 2008

Transaction ID: H481010.E20138

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

17.27

30.70

47.97

**C. Full Name (Last, First, Middle Initial)**

Jason Heffley

Mailing Address

3449 N Racine Ave # 1

City

State

Zip Code

Chicago

IL

60657-1536

Purpose of Disbursement:  
Reimbursement: See MemosCategory/  
TypeActivity or Event Identifier:  
ADMINISTRATION B 21

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

845243.85

Date 09 / 30 / 2008

Transaction ID: H481010.E20139

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

108.51

192.90

301.41

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

150.84

268.16

419.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 102 / 128

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Illinois Republican Party

**A. Full Name (Last, First, Middle Initial)**  
 Jason Heffley

Mailing Address

3449 N Racine Ave # 1

City

State

Zip Code

Chicago

IL

60657-1536

Purpose of Disbursement:  
 Mileage Reimbursement

Category/  
Type

Activity or Event Identifier:  
 ADMINISTRATION B 21

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt

☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

822567.98

Date  M  M /  D  D /  Y  Y  Y  Y  
 09 / 15 / 2008

Transaction ID: H481010.E20140

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

227.45

404.35

631.80

**B. Full Name (Last, First, Middle Initial)**  
 Jason Heffley

Mailing Address

3449 N Racine Ave # 1

City

State

Zip Code

Chicago

IL

60657-1536

Purpose of Disbursement:  
 Reimbursement: See Memos

Category/  
Type

Activity or Event Identifier:  
 ADMINISTRATION B 21

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt

☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

823176.48

Date  M  M /  D  D /  Y  Y  Y  Y  
 09 / 15 / 2008

Transaction ID: H481010.E20141

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

219.06

389.44

608.50

**C. Full Name (Last, First, Middle Initial)**  
 Lance Trover

Mailing Address

616 N 5th St

City

State

Zip Code

Vienna

IL

62995-1633

Purpose of Disbursement:  
 Mileage Reimbursement

Category/  
Type

Activity or Event Identifier:  
 ADMINISTRATION B 21

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt

☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

821491.78

Date  M  M /  D  D /  Y  Y  Y  Y  
 09 / 15 / 2008

Transaction ID: H481010.E20152

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

171.43

304.76

476.19

## **SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

617.94

1098.55

1716.49

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 103 / 128

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Illinois Republican Party

**A. Full Name (Last, First, Middle Initial)**  
 Lance Trover

Mailing Address

616 N 5th St

City

State

Zip Code

Vienna

IL

62995-1633

Purpose of Disbursement:

Reimbursement: See Memos

Category/  
Type

Activity or Event Identifier:

ADMINISTRATION B 21

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

821936.18

Date

M M

/

D D

/

Y Y

Y Y

0 9

1 5

2 0

0 8

Transaction ID: H481010.E20153

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

159.98

284.42

444.40

**B. Full Name (Last, First, Middle Initial)**  
 Lance Trover

Mailing Address

616 N 5th St

City

State

Zip Code

Vienna

IL

62995-1633

Purpose of Disbursement:

Reimbursement: See Memos

Category/  
Type

Activity or Event Identifier:

ADMINISTRATION B 21

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

844894.47

Date

M M

/

D D

/

Y Y

Y Y

0 9

3 0

2 0

0 8

Transaction ID: H481010.E20154

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

2.88

5.12

8.00

**C. Full Name (Last, First, Middle Initial)**  
 Amanda Wears

Mailing Address

2030 W Irving Park Rd

City

State

Zip Code

Chicago

IL

60618-3910

Purpose of Disbursement:

Non-FEA Payroll

Category/  
Type

Activity or Event Identifier:

ADMINISTRATION B 21

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

832730.16

Date

M M

/

D D

/

Y Y

Y Y

0 9

1 5

2 0

0 8

Transaction ID: H481010.E20157

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

542.19

963.88

1506.07

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

705.05

1253.42

1958.47

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 104 / 128  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Illinois Republican Party

**A. Full Name (Last, First, Middle Initial)**  
 Amanda Wears

Mailing Address

2030 W Irving Park Rd

City	State	Zip Code
Chicago	IL	60618-3910

Purpose of Disbursement:  
 Reimbursement: See Memos

Category/Type

Activity or Event Identifier:  
 ADMINISTRATION B 21

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support  
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

832834.45

Date 

M	M
0	9

 / 

D	D
1	5

 / 

Y	Y	Y	Y
2	0	0	8

Transaction ID: H481010.E20164

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
37.54		66.75		104.29

**B. Full Name (Last, First, Middle Initial)**  
 Amanda Wears

Mailing Address

2030 W Irving Park Rd

City	State	Zip Code
Chicago	IL	60618-3910

Purpose of Disbursement:  
 Reimbursement: See Memos

Category/Type

Activity or Event Identifier:  
 ADMINISTRATION B 21

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support  
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

843559.26

Date 

M	M
0	9

 / 

D	D
3	0

 / 

Y	Y	Y	Y
2	0	0	8

Transaction ID: H481010.E20165

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
18.00		32.00		50.00

**C. Full Name (Last, First, Middle Initial)**  
 Joe Weiss

Mailing Address

1683 Constitution Dr

City	State	Zip Code
Glenview	IL	60026-7705

Purpose of Disbursement:  
 Reimbursement: See Memos

Category/Type

Activity or Event Identifier:  
 ADMINISTRATION B 21

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support  
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

840722.24

Date 

M	M
0	9

 / 

D	D
3	0

 / 

Y	Y	Y	Y
2	0	0	8

Transaction ID: H481010.E20179

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
45.00		79.99		124.99

## **SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
100.54		178.74		279.28

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT



# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 105 / 128  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Illinois Republican Party

**A. Full Name (Last, First, Middle Initial)**  
 U.S. Postmaster

Mailing Address  
 2105 E. Cook St.

City State Zip Code  
 Springfield IL 62703-9998

Purpose of Disbursement:  
 Non-FEA Postage Reimbursement

Category/Type

Activity or Event Identifier:  
 ADMINISTRATION B 21  
**[MEMO ITEM]** Non-FEA Postage Reimbursement

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support  
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

38.10

Date  M  M /  D  D /  Y  Y  Y  Y  
 09 / 30 / 2008

Transaction ID: H481010.E20075

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

13.72

24.38

38.10

**B. Full Name (Last, First, Middle Initial)**  
 Staples

Mailing Address  
 P.O. Box 30292

City State Zip Code  
 Salt Lake City UT 84130-

Purpose of Disbursement:  
 Office Supply Reimbursement

Category/Type

Activity or Event Identifier:  
 ADMINISTRATION B 21  
**[MEMO ITEM]** Office Supply Reimbursement

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support  
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

99.10

Date  M  M /  D  D /  Y  Y  Y  Y  
 09 / 30 / 2008

Transaction ID: H481010.E20182

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

35.68

63.42

99.10

**C. Full Name (Last, First, Middle Initial)**  
 Candlewood Suites

Mailing Address  
 1100 N US Route 45

City State Zip Code  
 Libertyville IL 60048-

Purpose of Disbursement:  
 Hotel Reimbursement

Category/Type

Activity or Event Identifier:  
 ADMINISTRATION B 21  
**[MEMO ITEM]** Hotel Reimbursement

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support  
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

111.97

Date  M  M /  D  D /  Y  Y  Y  Y  
 09 / 30 / 2008

Transaction ID: H481014.E20242

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

40.31

71.66

111.97

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

0.00

0.00

0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 106 / 128  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Illinois Republican Party

**A. Full Name (Last, First, Middle Initial)**  
 Sprint PCS

Mailing Address

P.O. Box 740602

City State Zip Code

Cincinnati OH 45274-

Purpose of Disbursement:  
 Cell Phone Reimbursement

Category/  
Type

Activity or Event Identifier:  
 ADMINISTRATION B 21

**[MEMO ITEM]** Cell Phone Reimbursement

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

124.99

Date M M / D D / Y Y Y Y

0 9 / 3 0 / 2 0 0 8

Transaction ID: H481010.E20181

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

45.00

79.99

124.99

**B. Full Name (Last, First, Middle Initial)**  
 Randolph & Wells Self Parking

Mailing Address

200 W. Randolph Street

City State Zip Code

Chicago IL 60601-

Purpose of Disbursement:  
 Parking Reimbursement

Category/  
Type

Activity or Event Identifier:  
 ADMINISTRATION B 21

**[MEMO ITEM]** Parking Reimbursement

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

73.00

Date M M / D D / Y Y Y Y

0 9 / 3 0 / 2 0 0 8

Transaction ID: H481010.E20113

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

26.28

46.72

73.00

**C. Full Name (Last, First, Middle Initial)**  
 T-Mobile Wireless

Mailing Address

P.O. Box 790047

City State Zip Code

Saint Louis MO 63179-

Purpose of Disbursement:  
 Cell Phone Reimbursement

Category/  
Type

Activity or Event Identifier:  
 ADMINISTRATION B 21

**[MEMO ITEM]** Cell Phone Reimbursement

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

100.00

Date M M / D D / Y Y Y Y

0 9 / 3 0 / 2 0 0 8

Transaction ID: H481010.E20202

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

36.00

64.00

100.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

0.00

0.00

0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 107 / 128  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Illinois Republican Party

**A. Full Name (Last, First, Middle Initial)**  
 Chicago Carriage Cab Co.

Mailing Address

2617 S. Wabash

City	State	Zip Code
Chicago	IL	60616-

Purpose of Disbursement:  
 Cab Reimbursement

Category/  
Type

Activity or Event Identifier:  
 ADMINISTRATION B 21

**[MEMO ITEM]** Cab Reimbursement

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

15.00

Date 

M	M
0	9

 / 

D	D
3	0

 / 

Y	Y	Y	Y
2	0	0	8

Transaction ID: H481014.E20246

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

5.40

9.60

15.00

**B. Full Name (Last, First, Middle Initial)**  
 Verizon Wireless

Mailing Address

P.O. Box 25506

City	State	Zip Code
Lehigh Valley	PA	18002-

Purpose of Disbursement:  
 Cell Phone Reimbursement

Category/  
Type

Activity or Event Identifier:  
 ADMINISTRATION B 21

**[MEMO ITEM]** Cell Phone Reimbursement

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

399.41

Date 

M	M
0	9

 / 

D	D
3	0

 / 

Y	Y	Y	Y
2	0	0	8

Transaction ID: H481010.E20115

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

143.79

255.62

399.41

**C. Full Name (Last, First, Middle Initial)**  
 Shell Oil Company

Mailing Address

P.O. Box 2463

City	State	Zip Code
Houston	TX	77252-

Purpose of Disbursement:  
 Gas Reimbursement

Category/  
Type

Activity or Event Identifier:  
 ADMINISTRATION B 21

**[MEMO ITEM]** Gas Reimbursement

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

59.11

Date 

M	M
0	9

 / 

D	D
3	0

 / 

Y	Y	Y	Y
2	0	0	8

Transaction ID: H481014.E20251

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

21.28

37.83

59.11

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

0.00

0.00

0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 108 / 128

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Illinois Republican Party

**A. Full Name (Last, First, Middle Initial)**

Standard Parking

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

76.00

## Mailing Address

900 N. Michigan Avenue Suite 1600

City State Zip Code

Chicago IL 60611-

Purpose of Disbursement:  
Parking ReimbursementCategory/  
TypeActivity or Event Identifier:  
ADMINISTRATION B 21**[MEMO ITEM]** Parking ReimbursementDate 

M	M
0	9

 / 

D	D
3	0

 / 

Y	Y	Y	Y
2	0	0	8

Transaction ID: H481010.E20200

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

27.36

48.64

76.00

**B. Full Name (Last, First, Middle Initial)**

Avis

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

114.34

## Mailing Address

10000 Bessie Coleman Drive

City State Zip Code

Chicago IL 60666-

Purpose of Disbursement:  
Car Rental ReimbursementCategory/  
TypeActivity or Event Identifier:  
ADMINISTRATION B 21**[MEMO ITEM]** Car Rental ReimbursementDate 

M	M
0	9

 / 

D	D
3	0

 / 

Y	Y	Y	Y
2	0	0	8

Transaction ID: H481014.E20250

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

41.16

73.18

114.34

**C. Full Name (Last, First, Middle Initial)**

Mullens Grill

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

58.01

## Mailing Address

3080 Warrenville Road

City State Zip Code

Lisle IL 60532-

Purpose of Disbursement:  
Meal ReimbursementCategory/  
TypeActivity or Event Identifier:  
ADMINISTRATION B 21**[MEMO ITEM]** Meal ReimbursementDate 

M	M
0	9

 / 

D	D
3	0

 / 

Y	Y	Y	Y
2	0	0	8

Transaction ID: H481014.E20243

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

20.88

37.13

58.01

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

0.00

0.00

0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 109 / 128  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Illinois Republican Party

**A. Full Name (Last, First, Middle Initial)**  
 Thorntons Gas

Mailing Address

2208 Peoria Road

City State Zip Code  
 Springfield IL 62702-

Purpose of Disbursement:  
 Office Supply Reimbursement

Category/  
Type

Activity or Event Identifier:  
 ADMINISTRATION B 21

[MEMO ITEM] Office Supply Reimbursement

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

9.94

Date M M / D D / Y Y Y Y  
 0 9 / 3 0 / 2 0 0 8

Transaction ID: H481014.E20241

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

3.58

6.36

9.94

**B. Full Name (Last, First, Middle Initial)**  
 InterContinental Hotels

Mailing Address

3 Ravinia Drive Suite 100

City State Zip Code  
 Atlanta GA 30346-

Purpose of Disbursement:  
 Hotel Reimbursement

Category/  
Type

Activity or Event Identifier:  
 ADMINISTRATION B 21

[MEMO ITEM] Hotel Reimbursement

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

105.44

Date M M / D D / Y Y Y Y  
 0 9 / 3 0 / 2 0 0 8

Transaction ID: H481010.E20128

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

37.96

67.48

105.44

**C. Full Name (Last, First, Middle Initial)**  
 Taxi Affiliation Services, LLP

Mailing Address

2230 S Wabash Ave

City State Zip Code  
 Chicago IL 60616-2110

Purpose of Disbursement:  
 Cab Reimbursement

Category/  
Type

Activity or Event Identifier:  
 ADMINISTRATION B 21

[MEMO ITEM] Cab Reimbursement

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

8.00

Date M M / D D / Y Y Y Y  
 0 9 / 3 0 / 2 0 0 8

Transaction ID: H481015.E20278

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

2.88

5.12

8.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

0.00

0.00

0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 110 / 128  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Illinois Republican Party

**A. Full Name (Last, First, Middle Initial)**  
 Nine East Coffee

Mailing Address

9 E Stephenson Street

City State Zip Code

Freeport IL 61032-

Purpose of Disbursement:  
 Meal Reimbursement

Category/  
Type

Activity or Event Identifier:  
 ADMINISTRATION B 21

**[MEMO ITEM]** Meal Reimbursement

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

7.70

Date 

M	M
0	9

 / 

D	D
3	0

 / 

Y	Y	Y	Y
2	0	0	8

Transaction ID: H481014.E20244

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

2.77

4.93

7.70

**B. Full Name (Last, First, Middle Initial)**  
 Connies Pizza

Mailing Address

2373 S Archer Avenue

City State Zip Code

Chicago IL 60616-

Purpose of Disbursement:  
 Meal Reimbursement

Category/  
Type

Activity or Event Identifier:  
 ADMINISTRATION B 21

**[MEMO ITEM]** Meal Reimbursement

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

40.96

Date 

M	M
0	9

 / 

D	D
3	0

 / 

Y	Y	Y	Y
2	0	0	8

Transaction ID: H481014.E20249

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

14.75

26.21

40.96

**C. Full Name (Last, First, Middle Initial)**  
 Joe Weiss

Mailing Address

1683 Constitution Dr

City State Zip Code

Glenview IL 60026-7705

Purpose of Disbursement:  
 Mileage Reimbursement

Category/  
Type

Activity or Event Identifier:  
 ADMINISTRATION B 21

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

840873.17

Date 

M	M
0	9

 / 

D	D
3	0

 / 

Y	Y	Y	Y
2	0	0	8

Transaction ID: H481010.E20180

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

54.33

96.60

150.93

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

54.33

96.60

150.93

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 111 / 128  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Illinois Republican Party

**A. Full Name (Last, First, Middle Initial)**  
 Mike Zolnierowicz

Mailing Address  
 3648 Venard Rd

City State Zip Code  
 Downers Grove IL 60515-1349

Purpose of Disbursement:  
 Reimbursement: See Memos

Activity or Event Identifier:  
 ADMINISTRATION B 21

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support  
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

843509.26

Date  M  M /  D  D /  Y  Y  Y  Y  
 09 / 30 / 2008

Transaction ID: H481010.E20191

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text"/> 113.19		<input type="text"/> 201.22		<input type="text"/> 314.41

**B. Full Name (Last, First, Middle Initial)**  
 Markus Veile

Mailing Address  
 3109 Cascade Dr

City State Zip Code  
 Springfield IL 62704-6523

Purpose of Disbursement:  
 Consulting:Technical&IT-Not Employee

Activity or Event Identifier:  
 ADMINISTRATION B 21

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support  
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

814908.28

Date  M  M /  D  D /  Y  Y  Y  Y  
 09 / 15 / 2008

Transaction ID: H481010.E20192

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text"/> 1080.00		<input type="text"/> 1920.00		<input type="text"/> 3000.00

**C. Full Name (Last, First, Middle Initial)**  
 Markus Veile

Mailing Address  
 3109 Cascade Dr

City State Zip Code  
 Springfield IL 62704-6523

Purpose of Disbursement:  
 Mileage Reimbursement

Activity or Event Identifier:  
 ADMINISTRATION B 21

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support  
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

815551.78

Date  M  M /  D  D /  Y  Y  Y  Y  
 09 / 15 / 2008

Transaction ID: H481010.E20193

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text"/> 231.66		<input type="text"/> 411.84		<input type="text"/> 643.50

## **SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text"/> 1424.85		<input type="text"/> 2533.06		<input type="text"/> 3957.91

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
<input type="text"/>	<input type="text"/>	<input type="text"/>

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 112 / 128

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Illinois Republican Party

**A. Full Name (Last, First, Middle Initial)**

Markus Veile

Mailing Address

3109 Cascade Dr

City

State

Zip Code

Springfield

IL

62704-6523

Purpose of Disbursement:

Reimbursement: See Memos

Category/  
Type

Activity or Event Identifier:

ADMINISTRATION B 21

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

815607.41

Date

M M

/

D D

/

Y Y

Y Y

0 9

1 5

2 0

0 8

Transaction ID: H481010.E20194

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

20.03

35.60

55.63

**B. Full Name (Last, First, Middle Initial)**

U.S. Postmaster

Mailing Address

2105 E. Cook St.

City

State

Zip Code

Springfield

IL

62703-9998

Purpose of Disbursement:

Non-FEA Postage Reimbursement

Category/  
Type

Activity or Event Identifier:

ADMINISTRATION B 21

**[MEMO ITEM]** Non-FEA Postage Reimbursement

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

26.44

Date

M M

/

D D

/

Y Y

Y Y

0 9

1 5

2 0

0 8

Transaction ID: H481010.E20073

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

9.52

16.92

26.44

**C. Full Name (Last, First, Middle Initial)**

Staples

Mailing Address

P.O. Box 30292

City

State

Zip Code

Salt Lake City

UT

84130-

Purpose of Disbursement:

Office Supply Reimbursement

Category/  
Type

Activity or Event Identifier:

ADMINISTRATION B 21

**[MEMO ITEM]** Office Supply Reimbursement

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

36.62

Date

M M

/

D D

/

Y Y

Y Y

0 9

1 5

2 0

0 8

Transaction ID: H481010.E20129

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

13.18

23.44

36.62

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

20.03

35.60

55.63

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT



# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 113 / 128

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Illinois Republican Party

**A. Full Name (Last, First, Middle Initial)**  
 United Airlines

Mailing Address

P.O. Box 66100

City State Zip Code  
 Chicago IL 60666-

Purpose of Disbursement:  
 Travel Reimbursement

Category/  
Type

Activity or Event Identifier:  
 ADMINISTRATION B 21

[MEMO ITEM] Travel Reimbursement

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

80.00

Date M M / D D / Y Y Y Y  
 0 9 / 1 5 / 2 0 0 8

Transaction ID: H481010.E20096

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

28.80

51.20

80.00

**B. Full Name (Last, First, Middle Initial)**  
 Randolph & Wells Self Parking

Mailing Address

200 W. Randolph Street

City State Zip Code  
 Chicago IL 60601-

Purpose of Disbursement:  
 Parking Reimbursement

Category/  
Type

Activity or Event Identifier:  
 ADMINISTRATION B 21

[MEMO ITEM] Parking Reimbursement

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

96.00

Date M M / D D / Y Y Y Y  
 0 9 / 1 5 / 2 0 0 8

Transaction ID: H481010.E20112

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

34.56

61.44

96.00

**C. Full Name (Last, First, Middle Initial)**  
 T-Mobile Wireless

Mailing Address

P.O. Box 790047

City State Zip Code  
 Saint Louis MO 63179-

Purpose of Disbursement:  
 Cell Phone Reimbursement

Category/  
Type

Activity or Event Identifier:  
 ADMINISTRATION B 21

[MEMO ITEM] Cell Phone Reimbursement

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

147.17

Date M M / D D / Y Y Y Y  
 0 9 / 1 5 / 2 0 0 8

Transaction ID: H481010.E20201

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

52.98

94.19

147.17

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

0.00

0.00

0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 114 / 128

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Illinois Republican Party

**A. Full Name (Last, First, Middle Initial)**  
 Verizon Wireless

Mailing Address

P.O. Box 25506

City State Zip Code

Lehigh Valley

PA

18002-

Purpose of Disbursement:  
 Cell Phone Reimbursement

Category/  
Type

Activity or Event Identifier:  
 ADMINISTRATION B 21

[MEMO ITEM] Cell Phone Reimbursement

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

286.12

Date 09 / 15 / 2008

Transaction ID: H481010.E20114

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

103.00

183.12

286.12

**B. Full Name (Last, First, Middle Initial)**  
 Target

Mailing Address

1000 Nicollet Mall

City State Zip Code

Minneapolis

MN

55403-

Purpose of Disbursement:  
 Office Supply Reimbursement

Category/  
Type

Activity or Event Identifier:  
 ADMINISTRATION B 21

[MEMO ITEM] Office Supply Reimbursement

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

38.63

Date 09 / 15 / 2008

Transaction ID: H481010.E20195

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

13.91

24.72

38.63

**C. Full Name (Last, First, Middle Initial)**  
 Flash Taxi

Mailing Address

709 N. Main

City State Zip Code

Mount Prospect

IL

60056-

Purpose of Disbursement:  
 Cab Reimbursement

Category/  
Type

Activity or Event Identifier:  
 ADMINISTRATION B 21

[MEMO ITEM] Cab Reimbursement

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

25.00

Date 09 / 15 / 2008

Transaction ID: H481010.E20168

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

9.00

16.00

25.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

0.00

0.00

0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 115 / 128

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Illinois Republican Party

**A. Full Name (Last, First, Middle Initial)**  
 Standard Parking

Mailing Address

900 N. Michigan Avenue Suite 1600

City State Zip Code  
 Chicago IL 60611-

Purpose of Disbursement:  
 Parking Reimbursement

Category/  
Type

Activity or Event Identifier:  
 ADMINISTRATION B 21

**[MEMO ITEM]** Parking Reimbursement

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

38.00

Date 

M	M
0	9

 / 

D	D
1	5

 / 

Y	Y	Y	Y
2	0	0	8

Transaction ID: H481010.E20199

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

13.68

24.32

38.00

**B. Full Name (Last, First, Middle Initial)**  
 Walmart, Inc.

Mailing Address

Highway 102/14Th Street

City State Zip Code  
 Bentonville AR 72716-

Purpose of Disbursement:  
 Office Supply Reimbursement

Category/  
Type

Activity or Event Identifier:  
 ADMINISTRATION B 21

**[MEMO ITEM]** Office Supply Reimbursement

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

15.56

Date 

M	M
0	9

 / 

D	D
1	5

 / 

Y	Y	Y	Y
2	0	0	8

Transaction ID: H481010.E20130

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

5.60

9.96

15.56

**C. Full Name (Last, First, Middle Initial)**  
 InterContinental Hotels

Mailing Address

3 Ravinia Drive Suite 100

City State Zip Code  
 Atlanta GA 30346-

Purpose of Disbursement:  
 Hotel Reimbursement

Category/  
Type

Activity or Event Identifier:  
 ADMINISTRATION B 21

**[MEMO ITEM]** Hotel Reimbursement

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

384.18

Date 

M	M
0	9

 / 

D	D
1	5

 / 

Y	Y	Y	Y
2	0	0	8

Transaction ID: H481010.E20095

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

138.30

245.88

384.18

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

0.00

0.00

0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 116 / 128  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Illinois Republican Party

**A. Full Name (Last, First, Middle Initial)**

Starbucks Corporation

Mailing Address

2401 Utah Ave S

City

State

Zip Code

Seattle

WA

98134-1436

Purpose of Disbursement:

Meal Reimbursement

Category/  
Type

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

6.40

Activity or Event Identifier:

ADMINISTRATION B 21

**[MEMO ITEM]** Meal ReimbursementDate  M  M /  D  D /  Y  Y  Y  Y

09

15

20

08

Transaction ID: H481010.E20167

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

2.30

4.10

6.40

**B. Full Name (Last, First, Middle Initial)**

Millennium Hotel Minneapolis

Mailing Address

1313 Nicollet Ave

City

State

Zip Code

Minneapolis

MN

55403-2630

Purpose of Disbursement:

Meal Reimbursement

Category/  
Type

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

79.10

Activity or Event Identifier:

ADMINISTRATION B 21

**[MEMO ITEM]** Meal ReimbursementDate  M  M /  D  D /  Y  Y  Y  Y

09

15

20

08

Transaction ID: H481010.E20100

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

28.48

50.62

79.10

**C. Full Name (Last, First, Middle Initial)**

Diamon Taxi

Mailing Address

1907 Charles Ave

City

State

Zip Code

Saint Paul

MN

55104-

Purpose of Disbursement:

Cab Reimbursement

Category/  
Type

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

75.00

Activity or Event Identifier:

ADMINISTRATION B 21

**[MEMO ITEM]** Cab ReimbursementDate  M  M /  D  D /  Y  Y  Y  Y

09

15

20

08

Transaction ID: H481010.E20098

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

27.00

48.00

75.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

0.00

0.00

0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 117 / 128  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Illinois Republican Party

**A. Full Name (Last, First, Middle Initial)**  
 The Local

Mailing Address

931 Nicollet Mall

City State Zip Code

Minneapolis MN 55402-

Purpose of Disbursement:  
 Meal Reimbursement

Category/  
Type

Activity or Event Identifier:  
 ADMINISTRATION B 21

**[MEMO ITEM]** Meal Reimbursement

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

290.34

Date M M / D D / Y Y Y Y

0 9 / 1 5 / 2 0 0 8

Transaction ID: H481010.E20099

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

104.52

185.82

290.34

**B. Full Name (Last, First, Middle Initial)**  
 Capital Grill

Mailing Address

801 Hennepin Avenue

City State Zip Code

Minneapolis MN 55402-

Purpose of Disbursement:  
 Meal Reimbursement

Category/  
Type

Activity or Event Identifier:  
 ADMINISTRATION B 21

**[MEMO ITEM]** Meal Reimbursement

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

374.82

Date M M / D D / Y Y Y Y

0 9 / 1 5 / 2 0 0 8

Transaction ID: H481010.E20101

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

134.94

239.88

374.82

**C. Full Name (Last, First, Middle Initial)**  
 Spikes Sports Bar & Grill

Mailing Address

1300 Nicollet Mall

City State Zip Code

Minneapolis MN 55403-

Purpose of Disbursement:  
 Meal Reimbursement

Category/  
Type

Activity or Event Identifier:  
 ADMINISTRATION B 21

**[MEMO ITEM]** Meal Reimbursement

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

172.89

Date M M / D D / Y Y Y Y

0 9 / 1 5 / 2 0 0 8

Transaction ID: H481010.E20142

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

62.24

110.65

172.89

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

0.00

0.00

0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 118 / 128  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Illinois Republican Party

**A. Full Name (Last, First, Middle Initial)**  
 Brits Pub

Mailing Address

1110 Nicolette Mall

City State Zip Code

Minneapolis MN 55403-

Purpose of Disbursement:  
 Meal Reimbursement

Category/  
Type

Activity or Event Identifier:  
 ADMINISTRATION B 21

**[MEMO ITEM]** Meal Reimbursement

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

248.35

Date  M  M /  D  D /  Y  Y  Y  Y

09 / 15 / 2008

Transaction ID: H481010.E20143

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

89.41

158.94

248.35

**B. Full Name (Last, First, Middle Initial)**  
 Pizza Luce

Mailing Address

400 1st Avenue North

City State Zip Code

Minneapolis MN 55401-

Purpose of Disbursement:  
 Meal Reimbursement

Category/  
Type

Activity or Event Identifier:  
 ADMINISTRATION B 21

**[MEMO ITEM]** Meal Reimbursement

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

42.47

Date  M  M /  D  D /  Y  Y  Y  Y

09 / 15 / 2008

Transaction ID: H481010.E20155

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

15.29

27.18

42.47

**C. Full Name (Last, First, Middle Initial)**  
 Oceanaire

Mailing Address

1300 Nicollet Avenue

City State Zip Code

Minneapolis MN 55403-

Purpose of Disbursement:  
 Meal Reimbursement

Category/  
Type

Activity or Event Identifier:  
 ADMINISTRATION B 21

**[MEMO ITEM]** Meal Reimbursement

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

194.46

Date  M  M /  D  D /  Y  Y  Y  Y

09 / 15 / 2008

Transaction ID: H481010.E20156

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

70.01

124.45

194.46

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

0.00

0.00

0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 119 / 128

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Illinois Republican Party

**A. Full Name (Last, First, Middle Initial)**

Mike Zolnierowicz

Mailing Address

3648 Venard Rd

City

State

Zip Code

Downers Grove

IL

60515-1349

Purpose of Disbursement:

Reimbursement: See Memos

Category/  
Type

Activity or Event Identifier:

ADMINISTRATION B 21

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

831224.09

Date 

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	5	/	2	0	0	8

Transaction ID: H481010.E20196

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

20.11

35.75

55.86

**B. Full Name (Last, First, Middle Initial)**

Crowne Plaza Springfield

Mailing Address

3000 S. Dirksen Pkwy.

City

State

Zip Code

Springfield

IL

62703-

Purpose of Disbursement:

Hotel Expense Reimbursement

Category/  
Type

Activity or Event Identifier:

ADMINISTRATION B 21

**[MEMO ITEM]** Hotel Expense Reimbursement

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

-12.99

Date 

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	5	/	2	0	0	8

Transaction ID: H481010.E20197

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

-4.68

-8.31

-12.99

**C. Full Name (Last, First, Middle Initial)**

Flowers By Miss Bertha

Mailing Address

2100 Nicollet Avenue

City

State

Zip Code

Minneapolis

MN

55404-

Purpose of Disbursement:

Flowers Reimbursement

Category/  
Type

Activity or Event Identifier:

ADMINISTRATION B 21

**[MEMO ITEM]** Flowers Reimbursement

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

68.85

Date 

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	5	/	2	0	0	8

Transaction ID: H481010.E20198

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

24.79

44.06

68.85

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

20.11

35.75

55.86

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 120 / 128  
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Illinois Republican Party

**A. Full Name (Last, First, Middle Initial)**  
Illinois Department of Revenue

Mailing Address

P.O. Box 88294

 City State Zip Code  
Chicago IL 60680-

 Purpose of Disbursement:  
Non-FEA Payroll Taxes
Category/  
Type
 Activity or Event Identifier:  
ADMINISTRATION B 21

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

815826.73

 Date  M  M /  D  D /  Y  Y  Y  Y  
09 / 15 / 2008

Transaction ID: H481010.E20203

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
47.25		84.00		131.25

**B. Full Name (Last, First, Middle Initial)**  
Illinois Department of Revenue

Mailing Address

P.O. Box 88294

 City State Zip Code  
Chicago IL 60680-

 Purpose of Disbursement:  
Non-FEA Payroll Taxes
Category/  
Type
 Activity or Event Identifier:  
ADMINISTRATION B 21

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

841886.47

 Date  M  M /  D  D /  Y  Y  Y  Y  
09 / 30 / 2008

Transaction ID: H481010.E20205

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
23.24		41.31		64.55

**C. Full Name (Last, First, Middle Initial)**  
Houser, Inc.

Mailing Address

2332 E. Reservoir

 City State Zip Code  
Springfield IL 62702-

 Purpose of Disbursement:  
Window Cleaning
Category/  
Type
 Activity or Event Identifier:  
ADMINISTRATION B 21

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

811908.28

 Date  M  M /  D  D /  Y  Y  Y  Y  
09 / 15 / 2008

Transaction ID: H481014.E20210

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
7.20		12.80		20.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
77.69		138.11		215.80

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT



# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 121 / 128  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Illinois Republican Party

**A. Full Name (Last, First, Middle Initial)**

Ace Sign Co.

Mailing Address

402 N. Fourth St.

City State Zip Code

Springfield IL 62702-

Purpose of Disbursement:  
Party Printing Non-CandidateCategory/  
TypeActivity or Event Identifier:  
ADMINISTRATION B 21

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

818807.73

Date 

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	5	/	2	0	0	8

Transaction ID: H481014.E20211

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

375.84

668.16

1044.00

**B. Full Name (Last, First, Middle Initial)**

LHF Specialty Advertising

Mailing Address

1106 North Stephens

City State Zip Code

Springfield IL 62702-

Purpose of Disbursement:  
Party MomentosCategory/  
TypeActivity or Event Identifier:  
ADMINISTRATION B 21

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

826428.77

Date 

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	5	/	2	0	0	8

Transaction ID: H481014.E20212

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

802.87

1427.33

2230.20

**C. Full Name (Last, First, Middle Initial)**

Comcast Cable

Mailing Address

P.O. Box 3001

City State Zip Code

Southeastern PA 19398-

Purpose of Disbursement:  
Cable TelevisionCategory/  
TypeActivity or Event Identifier:  
ADMINISTRATION B 21

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

826530.13

Date 

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	5	/	2	0	0	8

Transaction ID: H481014.E20213

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

36.49

64.87

101.36

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

1215.20

2160.36

3375.56

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 122 / 128

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Illinois Republican Party

**A. Full Name (Last, First, Middle Initial)**  
 Coffee Unlimited

Mailing Address

1408 South Clinton, #1701

City State Zip Code

Chicago IL 60601-

Purpose of Disbursement:  
Office SuppliesCategory/  
TypeActivity or Event Identifier:  
ADMINISTRATION B 21

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

823187.23

Date 

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	5	/	2	0	0	8

Transaction ID: H481014.E20214

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

3.87

6.88

10.75

**B. Full Name (Last, First, Middle Initial)**  
 Watts Copy System

Mailing Address

2860 Stanton Avenue

City State Zip Code

Springfield IL 62708-

Purpose of Disbursement:  
Copier LeaseCategory/  
TypeActivity or Event Identifier:  
ADMINISTRATION B 21

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

823437.23

Date 

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	5	/	2	0	0	8

Transaction ID: H481014.E20215

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

90.00

160.00

250.00

**C. Full Name (Last, First, Middle Initial)**  
 Hanson Information Systems

Mailing Address

2433 West White Oaks Dr.

City State Zip Code

Springfield IL 62704-

Purpose of Disbursement:  
Internet AccessCategory/  
TypeActivity or Event Identifier:  
ADMINISTRATION B 21

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

823929.99

Date 

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	5	/	2	0	0	8

Transaction ID: H481014.E20216

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

51.97

92.40

144.37

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

145.84

259.28

405.12

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 123 / 128  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Illinois Republican Party

**A. Full Name (Last, First, Middle Initial)**  
 Garland W. Brinner, CPA

Mailing Address

302 S. Hamilton Street

City	State	Zip Code
Lincoln	IL	62656-

Purpose of Disbursement:  
 Accounting Services

Category/Type

Activity or Event Identifier:  
 ADMINISTRATION B 21

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

817763.73

Date 

M	M
0	9

 / 

D	D
1	5

 / 

Y	Y	Y	Y
2	0	0	8

Transaction ID: H481014.E20217

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

157.32

279.68

437.00

**B. Full Name (Last, First, Middle Initial)**  
 FedEx

Mailing Address

P.O. Box 727

City	State	Zip Code
Memphis	TN	38101-2112

Purpose of Disbursement:  
 Parcel Delivery

Category/Type

Activity or Event Identifier:  
 ADMINISTRATION B 21

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

811622.86

Date 

M	M
0	9

 / 

D	D
1	5

 / 

Y	Y	Y	Y
2	0	0	8

Transaction ID: H481014.E20218

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

105.09

186.84

291.93

**C. Full Name (Last, First, Middle Initial)**  
 LexisNexis

Mailing Address

P.O. Box 2314

City	State	Zip Code
Carol Stream	IL	60132-

Purpose of Disbursement:  
 Research Application

Category/Type

Activity or Event Identifier:  
 ADMINISTRATION B 21

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

824198.57

Date 

M	M
0	9

 / 

D	D
1	5

 / 

Y	Y	Y	Y
2	0	0	8

Transaction ID: H481014.E20219

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

96.69

171.89

268.58

## **SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

359.10

638.41

997.51

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 124 / 128

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Illinois Republican Party

**A. Full Name (Last, First, Middle Initial)**  
 Sams Club

Mailing Address

P.O. Box 660617, Dept. 49

City	State	Zip Code
Dallas	TX	75266-0617

Purpose of Disbursement:  
 Office Supplies

Category/  
Type

Activity or Event Identifier:  
 ADMINISTRATION B 21

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

815695.48

Date 

M	M
0	9

 / 

D	D
1	5

 / 

Y	Y	Y	Y
2	0	0	8

Transaction ID: H481014.E20220

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

31.71

56.36

88.07

**B. Full Name (Last, First, Middle Initial)**  
 17th Street Bar & Grill

Mailing Address

P.O. Box 382

City	State	Zip Code
Murphysboro	IL	62966-

Purpose of Disbursement:  
 Party Catering - Non-Candidate

Category/  
Type

Activity or Event Identifier:  
 ADMINISTRATION B 21

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

830360.83

Date 

M	M
0	9

 / 

D	D
1	5

 / 

Y	Y	Y	Y
2	0	0	8

Transaction ID: H481014.E20221

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

1379.05

2451.65

3830.70

**C. Full Name (Last, First, Middle Initial)**  
 Party Creations

Mailing Address

1808 W. Jefferson

City	State	Zip Code
Springfield	IL	62708-

Purpose of Disbursement:  
 Equipment Rental

Category/  
Type

Activity or Event Identifier:  
 ADMINISTRATION B 21

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

820885.68

Date 

M	M
0	9

 / 

D	D
1	5

 / 

Y	Y	Y	Y
2	0	0	8

Transaction ID: H481014.E20222

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

170.46

303.04

473.50

## **SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

1581.22

2811.05

4392.27

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 125 / 128

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Illinois Republican Party

**A. Full Name (Last, First, Middle Initial)**  
 DirecTV

Mailing Address

450 Pryor Blvd.

City	State	Zip Code
Sturgis	KY	42459-

Purpose of Disbursement:  
 Cable Television

Category/  
Type

Activity or Event Identifier:  
 ADMINISTRATION B 21

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

821015.59

Date 

M	M
0	9

 / 

D	D
1	5

 / 

Y	Y	Y	Y
2	0	0	8

Transaction ID: H481014.E20223

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

46.77

83.14

129.91

**B. Full Name (Last, First, Middle Initial)**  
 Wells Fargo Financial Capital

Mailing Address

PO Box 7777

City	State	Zip Code
San Francisco	CA	94120-7777

Purpose of Disbursement:  
 Postage Meter Lease

Category/  
Type

Activity or Event Identifier:  
 ADMINISTRATION B 21

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

838391.32

Date 

M	M
0	9

 / 

D	D
1	5

 / 

Y	Y	Y	Y
2	0	0	8

Transaction ID: H481014.E20224

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

266.40

473.61

740.01

**C. Full Name (Last, First, Middle Initial)**  
 Access One

Mailing Address

820 W Jackson Blvd Fl 6

City	State	Zip Code
Chicago	IL	60607-3026

Purpose of Disbursement:  
 Telephone Service

Category/  
Type

Activity or Event Identifier:  
 ADMINISTRATION B 21

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

838757.10

Date 

M	M
0	9

 / 

D	D
1	5

 / 

Y	Y	Y	Y
2	0	0	8

Transaction ID: H481014.E20225

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

131.68

234.10

365.78

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

444.85

790.85

1235.70

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 126 / 128  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Illinois Republican Party

**A. Full Name (Last, First, Middle Initial)**  
 Valco Awards and More, Inc.

Mailing Address

405 N. MacArthur Blvd.

City	State	Zip Code
Springfield	IL	62702-

Purpose of Disbursement:  
 Party Momentos

Category/  
Type

Activity or Event Identifier:  
 ADMINISTRATION B 21

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

835349.40

Date 

M	M
0	9

 / 

D	D
1	5

 / 

Y	Y	Y	Y
2	0	0	8

Transaction ID: H481014.E20226

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
286.33		509.03		795.36

**B. Full Name (Last, First, Middle Initial)**  
 Commonwealth Edison

Mailing Address

Bill Payment Center

City	State	Zip Code
Chicago	IL	60668-0001

Purpose of Disbursement:  
 Utilities

Category/  
Type

Activity or Event Identifier:  
 ADMINISTRATION B 21

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

820412.18

Date 

M	M
0	9

 / 

D	D
1	5

 / 

Y	Y	Y	Y
2	0	0	8

Transaction ID: H481014.E20229

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
65.43		116.32		181.75

**C. Full Name (Last, First, Middle Initial)**  
 United Parcel Service

Mailing Address

Lockbox 577

City	State	Zip Code
Carol Stream	IL	60132-

Purpose of Disbursement:  
 Parcel Delivery

Category/  
Type

Activity or Event Identifier:  
 ADMINISTRATION B 21

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

811286.93

Date 

M	M
0	9

 / 

D	D
1	5

 / 

Y	Y	Y	Y
2	0	0	8

Transaction ID: H481014.E20230

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
182.92		325.20		508.12

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
534.68		950.55		1485.23

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 127 / 128  
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Illinois Republican Party

**A. Full Name (Last, First, Middle Initial)**  
Home City Ice

Mailing Address

P.O. Box 111116

City State Zip Code

Cincinnati OH 45211-

Purpose of Disbursement:  
Ice and Beverages

Category/  
Type

Activity or Event Identifier:  
ADMINISTRATION B 21

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

837651.31

Date 09 / 15 / 2008

Transaction ID: H481014.E20231

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

162.54

288.96

451.50

**B. Full Name (Last, First, Middle Initial)**  
Aristotle International

Mailing Address

205 Pennsylvania Ave., SE

City State Zip Code

Washington DC 20003-

Purpose of Disbursement:  
Computer Software

Category/  
Type

Activity or Event Identifier:  
ADMINISTRATION B 21

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

817326.73

Date 09 / 15 / 2008

Transaction ID: H481014.E20232

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

540.00

960.00

1500.00

**C. Full Name (Last, First, Middle Initial)**  
Internal Revenue Service

Mailing Address

P.O. Box 970010

City State Zip Code

Saint Louis MO 63197-0010

Purpose of Disbursement:  
Non-FEA Payroll Taxes

Category/  
Type

Activity or Event Identifier:  
ADMINISTRATION B 21

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

840402.25

Date 09 / 18 / 2008

Transaction ID: H481014.E20233

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

464.07

825.02

1289.09

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

1166.61

2073.98

3240.59

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Illinois Republican Party

**A. Full Name (Last, First, Middle Initial)**

Puritan Springs Water

## Mailing Address

1709 North Kickapoo

City State Zip Code

Lincoln IL 62656-

Purpose of Disbursement:  
Bottled WaterCategory/  
TypeActivity or Event Identifier:  
ADMINISTRATION B 21

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

839113.16

Date 

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	8	/	2	0	0	8

Transaction ID: H481014.E20237

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

7.94

14.12

22.06

**B. Full Name (Last, First, Middle Initial)**

Building Maintenance Services

## Mailing Address

3260 Northfield Dr.

City State Zip Code

Springfield IL 62702-

Purpose of Disbursement:  
Janitorial ServiceCategory/  
TypeActivity or Event Identifier:  
ADMINISTRATION B 21

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

840597.25

Date 

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	8	/	2	0	0	8

Transaction ID: H481014.E20239

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

70.20

124.80

195.00

**C. Full Name (Last, First, Middle Initial)**

Brien Sheahan

## Mailing Address

5 St. Regis Court

City State Zip Code

Elmhurst IL 60126-

Purpose of Disbursement:  
Consulting: Mail Program Not-EmployCategory/  
TypeActivity or Event Identifier:  
ADMINISTRATION B 21

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

844886.47

Date 

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	3	0	/	2	0	0	8

Transaction ID: H481014.E20252

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

1080.00

1920.00

3000.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

1158.14

2058.92

3217.06

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

18814.30

33447.67

52261.97